


2007-FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2007 08:00 A
Secretary of State

DOCUMENT # 385744 1. Entity Name UTILITIES & IRRIGATION SUPPLY, INCORPORATED	
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Principal Place of Business 4441 HANCOCK BRIDGE PARKWAY NORTH FT. MYERS, FL 33903	Mailing Address 4441 HANCOCK BRIDGE PARKWAY NORTH FT. MYERS, FL 33903
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DO NOT WRITE IN THIS SPACE



02262007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1398477	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SARGEANT, JOHN E 4441 HANCOCK BRIDGE PKWY. FT MYERS, FL N. FT. MYERS, FL 33903	DO NOT WRITE IN THIS SPACE
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000653787 03/13/07-80036-003 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD SARGEANT, JOHN E. 4441 HANCOCK BRIDGE PKWY. N. FT. MYERS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TERRY, T RANKIN 1245 HANTON AVE FORT MYERS, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KNIESTEDT, JOHN G. 1714 W. BLUEWATER TERR. N. FT. MYERS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  John G. Kniestedt 2/27/07 239-995-5441
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #