2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

SIGNATURE:

FILED **DOCUMENT #385744** 07 JUN 19 PM 4: 27 **UTILITIES & IRRIGATION SUPPLY, INCORPORATED** SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 4441 HANCOCK BRIDGE PARKWAY 4441 HANCOCK BRIDGE PARKWAY NORTH FT. MYERS. FL 33903 NORTH FT. MYERS, FL 33903 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 06152007 Cha-P Applied For City & State City & State 4. FEI Number 59-1398477 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent KNIESTEDT. JUHN GI SARGEANT, JOHN E Street Address (P.O. Box Number is Not Acceptable) 4441 HANCOCK BRIDGE PKWY. FT MYERS, FL N. FT. MYERS, FL 33903 Zip Code 33703 FORT MYOLS 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 (JGK NOTE: Registered Agent signature required when reinstating 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 П Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ☐ Addition PTD ☐ Change TITLE Delete TITLE SARGEANT, JOHN E. NAME NAME 00104886429 STREET ADDRESS 4441 HANCOCK BRIDGE PKWY. STREET ADDRESS 06/26/07--01046--007 N. FT. MYERS, FL CITY-ST-ZIP CITY-ST-ZIP SD TERRY, T. RANKIN, JR. TITLE ☐ Delete TITLE Change : ■ Addition TERRY, T RANKIN NAME NAME 1245 HANTON AVE STREET ADDRESS STREET ADDRESS 33901 CITY-ST-ZIF FORT MYERS, FL 00000, CITY-ST-ZIP Change ☐ Delete Addition WNIESTEPT, JOHN G. A Change 4441 HANCOCK BRIDGE PKWY. KNIESTEDT, JOHN G. NAME NAME 1714 W. BLUEWATER TERR. STREET ADDRESS STREET ADDRESS N. FURT MYERS, FL 33903 CITY-ST-ZIP N. FT. MYERS, FL CITY-ST-7IP ☐ Delete TITLE TUCKER, CAROUNDT. Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP N. FORT MYORS, FL TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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 amoddress, with all other like empowered.

T. RANKIN TERRY, JR., SEC. 6/15/2007