2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2006
Secretary of State

DOCUMENT# 737178

Entity Name: FLORIDA IRRIGATION SOCIETY, INC.

Current Principal Place of Business:

9340 N. 56TH STREET
SUITE 105
TEMPLE TERRACE, FL 33617 US

New Principal Place of Business:

Current Mailing Address:

9340 N. 56TH STREET
SUITE 105
TEMPLE TERRACE, FL 33617 US

New Mailing Address:

FEI Number: 59-1781561 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMAROSA, JENNIFER C
9340 N. 56TH STREET
SUITE 105
TEMPLE TERRACE, FL 33617 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	ST. PEARRE, HARRY	
Address:	P.O. BOX 639	
City-St-Zip:	RIVERVIEW, FL 33568	
Title:	VD	( ) Delete
Name:	PERKINS, MICHAEL	
Address:	P.O. BOX 880667	
City-St-Zip:	BOCA RATON, FL 33488	
Title:	SD	( ) Delete
Name:	HUTCHEON, WILLIAM	
Address:	878 WATERWAY PLACE	
City-St-Zip:	LONGWOOD, FL 32750	
Title:	TD	( ) Delete
Name:	MIRAGLIOTTA, JOHN	
Address:	5508 W. LINEBAUGH AVE, SUITE 55	
City-St-Zip:	TAMPA, FL 33624	
Title:	D	( ) Delete
Name:	NEFF, RICHARD	
Address:	4770 NE 11TH AVENUE	
City-St-Zip:	FORT LAUDERDALE, FL 33334	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	TD	(X) Change ( ) Addition
Name:	NIMMO, DALE	
Address:	701 SHADICK DRIVE	
City-St-Zip:	ORANGE CITY, FL 32763	
Title:	D	(X) Change ( ) Addition
Name:	HINELINE, HARLAN	
Address:	P.O. BOX 290874	
City-St-Zip:	PORT ORANGE, FL 32129	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARRY ST. PEARRE PD 02/03/2006

Electronic Signature of Signing Officer or Director — Date