FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F15773

(7)

HIGH POINT IRRIGATION, INC.

FILED May 19 1997 8:00am Secretary of State



Principal Flace	e or pusmoss	(414	aling Address				1 1001100 1101 1101 01111 12011 12011 1111	*********		41411 1941
1212 21ST STE PALM HARBOR			12 21ST STREET ALM HARBOR FL 3460	83-3802						
							3. Date Incorporated or Qualified 01/22/1981	1	ito of Last F 18/1996	Report
2. Principal Pi	lace of Business	2a.	Mailing Address				4. FEI Number			pplied For
21		26	-				59-2055678			ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional		
22		27					Of Continuate of Citation Desired		Fee R	equired
City & State	е	28	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country 25	29	Zip	Go 30	untry	,	This corporation has liability for Ftorida Statutes	intangible		s. 199.032,
	9. Name and Address of Curren		stered Agent		Ţ		10. Name and Address of New Re	gistered	Agent	
CHIS	SSUS, RAY C				81	Name				
1212 21ST STREET					82	Street Add	dress (P.O. Box Number is Not Acceptat	ole)		
PAL	M HARBOR FL 34683				83					
									12-1 -	0-4-
					84	'		FL		Code
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State on familiar with, and accept the obligations.	2 and 6 of Flori	607.1508, Florida Sta ida. Such change wa of, Section 607.0505	atutes, the a as authorize . Florida Sta	aboved by	e-named cor y the corpora s.	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of pl the app	changing i ointment as	its registered s registered
SIGNATURE	Signature, typed or printed name of registered age						uired when reinstating)	DATE		
12.	OFFICERS AND	D DIREC	C1ORS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTO	RS IN 12
TITLE	ST		DELETE.	111	IIILF				Change	Addition
NAME	CHISSUS, ELAINE F			1.21	MAME	•				
STREET ADDRESS	1212 21ST STREET			1.3 5	STREET	ADDRESS				
CITY-ST-ZIP	PALM HARBOR, FL 00000			1,4 (OHY-S	ST - ZIP				
TITLE	P		☐ DELETE	2.1 1	IIILF				☐ Change	☐ Addition
NAME	CHISSUS, RAY C			2.21	MAME					
STREET ADDRESS	1212 21ST STREET			2.3 3	STREET	ADDRESS				
CITY-ST-ZIP	PALM HARBOR, FL 00000			2 4	CITY -	S1-ZIP				
TITLE			☐ DELETE	3.1	INLE				☐ Change	Addition
NAME	· •			3.21	NAME					
STREET ADDRESS				3.3 3	STREET	T ADORESS				
CITY-ST-ZIP				3,4	CITY-	\$1 - ZIP				
TITLE			☐ DELETÉ	4.1	HTLE				Change	Addition
NAME				4.2	NAME					
STREET ADDRESS				4.3	STREET	I ADDRESS				
CITY-ST-ZIP						ST - ZIF				
TITLE			☐ DELFTE	5.1	TALE				Change	Addition
NAME	1			5.2	NAME					
STREET ADDRESS				5.3	STREET	1 ADDRESS				
CITY-ST-ZIP				5.4	CITY-S	S1 - 7 (P				
TITLE			☐ DELETE	6.1	IIILE				☐ Change	☐ Addition
NAME				6.2	NAME	}				
STREET ADDRESS				6.3	STREE	T ADDRESS				
CITY-ST-ZIP				6.4	CITY-S	SI - 71P				
44			TT 700							4 M

Information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.