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Jun 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F15773 (7) 1. Corporation Name High Point Irrigation, Inc. 1212 21st St. Palm Harbor Fl. 34683-3802			
Principal Place of Business 1212 21st Street Palm Harbor Fl 34683		Mailing Address 29250 US 19 N #443 Clearwater, FL 33761	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	
24 1 25		29 30	
9. Name and Address of Current Registered Agent Chissus, Ray C. 29250 U.S. 19 N. #443 Clearwater, Fl. 33761		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE: Elaine F. Chissus Secretary 6/1/98			
12. OFFICERS AND DIRECTORS TITLE P NAME RAY C. Chissus STREET ADDRESS 29250 U.S. 19 N #443 CITY-ST-ZIP Clearwater, FL 33761 TITLE ST NAME Chissus, Elaine F. STREET ADDRESS 29250 U.S. 19 N. #443 CITY-ST-ZIP Clearwater, FL 33761 TITLE VP NAME Lee C. Chissus STREET ADDRESS 1212 21st St. CITY-ST-ZIP Palm Harbor Fl 34683 TITLE VP NAME Leslie E. Chissus STREET ADDRESS 1212 21st St. CITY-ST-ZIP Palm Harbor Fl 34683 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 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. SIGNATURE: Elaine F. Chissus (ELAINE F. Chissus) 6/1/98 (813) 781-7137			

CR2E034 (10/97)