

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002723

FILED
Apr 19, 2007
Secretary of State

Entity Name: CHRISTENSEN IRRIGATION CO., INC.

Current Principal Place of Business:

3505 CADILLAC AVENUE
STE O-206B
COSTA MESA, CA 926261434 US

New Principal Place of Business:

Current Mailing Address:

3505 CADILLAC AVENUE
STE O-206B
COSTA MESA, CA 926261434 US

New Mailing Address:

FEI Number: 95-3459074 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDP () Delete
Name: CHRISTENSEN, W. JACK
Address: 1214 RUTLAND RD., #6
City-St-Zip: NEWPORT BEACH, CA 92660

Title: VCD () Delete
Name: VILLALOBOS, SALVADOR A
Address: 2308 28TH STREET
City-St-Zip: SANTA MONICA, CA 90405

Title: VP () Delete
Name: VILLALOBOS, SALVADOR A
Address: 2308 28TH STREET
City-St-Zip: SANTA MONICA, CA 90405

Title: SD () Delete
Name: DANA, JAMES J
Address: 20932 QUEENS PARK AVENUE
City-St-Zip: HUNTINGTON BCH., CA 92646

Title: TD () Delete
Name: HAYDEN, JOHN L
Address: 350 EAST 53RD STREET, #3A
City-St-Zip: NEW YORK, NY 10022

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. JACK CHRISTENSEN

CDP

04/19/2007

Electronic Signature of Signing Officer or Director

_____ Date