

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000004175

1. Corporation Name
RAIN BIRD NATIONAL SALES CORPORATION

Principal Place of Business

145 GRAND AVE.
GLEN DORA CA 91740

Mailing Address

145 GRAND AVE.
GLEN DORA CA 91740

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

91741

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

91741

Country

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	NAME LAFETRA, ANTHONY W 145 GRAND AVE. GLEN DORA CA 91740	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				1.2 NAME	
TITLE	VSD	NAME LUDWICK, ARTHUR J 145 GRAND AVE. GLEN DORA CA 91740	<input type="checkbox"/> DELETE	1.3 STREET ADDRESS	
				1.4 CITY-ST-ZIP	91741
TITLE	D	NAME LUDWICK, SARAH L 145 GRAND AVE. GLEN DORA CA 91740	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				2.2 NAME	
TITLE	AS	NAME HUPP, EDWIN M. 841 EAST DALTON AVE. GLEN DORA CA	<input type="checkbox"/> DELETE	2.3 STREET ADDRESS	
				2.4 CITY-ST-ZIP	91741
TITLE		NAME HUPP, EDWIN M. 841 EAST DALTON AVE. GLEN DORA CA	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				3.2 NAME	
TITLE		NAME HUPP, EDWIN M. 841 EAST DALTON AVE. GLEN DORA CA	<input type="checkbox"/> DELETE	3.3 STREET ADDRESS	
				3.4 CITY-ST-ZIP	145 N. GRAND AVE. 91741
TITLE		NAME HUPP, EDWIN M. 841 EAST DALTON AVE. GLEN DORA CA	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				4.2 NAME	
TITLE		NAME HUPP, EDWIN M. 841 EAST DALTON AVE. GLEN DORA CA	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS	
				4.4 CITY-ST-ZIP	
TITLE		NAME HUPP, EDWIN M. 841 EAST DALTON AVE. GLEN DORA CA	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				5.2 NAME	
TITLE		NAME HUPP, EDWIN M. 841 EAST DALTON AVE. GLEN DORA CA	<input type="checkbox"/> DELETE	5.3 STREET ADDRESS	
				5.4 CITY-ST-ZIP	
TITLE		NAME HUPP, EDWIN M. 841 EAST DALTON AVE. GLEN DORA CA	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				6.2 NAME	
TITLE		NAME HUPP, EDWIN M. 841 EAST DALTON AVE. GLEN DORA CA	<input type="checkbox"/> DELETE	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, with all other like empowered.

SIGNATURE:

Edwin Hupp 3-5-99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90052 019 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/11/1994

4. FEI Number

95-1693094

Applied For

Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

10. Name and Address of New Registered Agent

CR2E034 (11/98)