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

CORPORATION ANNUAL REPORT 1002



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 27 1998 8:00am Secretary of State

DOCUMENT # F9500000712 (8)									_		
A & F IRRIGATION, INCORPORATED											
	4								A 1881/80 JULE INGRANI BOND BOND BOND BOND BOND		
'											
Principal Place of Business Mailing Address									1 (001)00 ((12 (000) 001)) 40111 40111 40111	48111 64111 12661 11	Bre 1/6/ 1891
	3 B NORTH				313 B NORTH JACKSON						
TULLAHOMA TN 37388 TULLAHOM						AHOMA TN 37388			DO NOT WRITE IN TH	IS SPACE	
								ŀ	3. Date Incorporated or Qualified	IO di AOL	<u>-</u>
									02/13/1995		ĺ
2.	. Principal Place of Business			2a. M	2a. Mailing Address				4. FEI Number	A	pplied For
21				26					62-1127296		ot Applicable
	Suite, Apt. #, etc.			├ -	Suite, Apt. #, etc.			ŀ	5. Certificate of Status Desired	T	Additional equired
22	City & State				City & State			}	6 Florito Comocion Financia		
23	Ony o orace	<u> </u>			28				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
	Zip	Country			Zip Country				8. This corporation owes or has paid the		
24			25	29		30		1	Personal Property Tax due June 30.		J No
			and Address of Curi	ent Register	ed Agent				10. Name and Address of New Registers	d Agent	
		Cent, Su				1	Name	Т	revor Holman		
449 WILLOW TREE DR.						ļī.	Street A	ddres	ss (P.O. Box Number is Not Acceptable)		
MELBOURNE FL 32940						L.	6056	6 Te	erra Rosa Circle		
·]	93				
						Ī	City		E		Code
11 Purpused to the provisions of Sections 607 0502 and 607 1508 Florida Statute							boyi	ntor			ts registered
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute office or registered agent, or both, in the State of Florida. Such change was at agent. I am familiar with, and accept the obligations of, Section 607.0505, Flor 							by the corpo	oration	n's board of directors. I hereby accept the	ppointment as	registered
			in, and accept the ob	igalions of, a	ection 607,0605, r	TOTICA STATE	ies.		3/17/	08	
SIGNATURE Signaline, lybed or profed name of registered agent and tide if applicable (NOTE:							Agent signature r	beruper	when reinstating) OATs		J
12.			OFFICERS /	ND DIRECTO		13.			ADDITIONS/CHANGES TO OFFICERS A		
TITL		ADDOTT	r, TOMMY		☐ DEL e te	1.1 TITU				Change	L Addition
NAN	i		REMONT CIRCLE			1.2 NAN	- I				
ľ	THE ALICHA THE 27200					1.3 STREET ADDRESS					
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	STREET ADDRESS - #7 CLAIREMONT CIR				2.3 STREE1 ADDRI				ه افتا این این می می می می می می می این این این این این این این این این ای		
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_	-ST-ZIP				ne. eee		Y-ST-ZIP			1 &	
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	EET ADDRESS						ET ADDRESS				1
	-ST-ZIP						'-ST-ZIP				İ
TITL					DELETE	6.1 TITL	****			Change	Addition
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STAL	EET ADDRESS					6.3 STR	EET ADDRESS				ł
Crty-St-ZiP							- ST - ZIP				
14	Lherehy c	artify that th	e information supplied	with this filing	a does not qualify	for the exer	nnting states	Lin Se	ection 119 07(3)(i). Florida Statutes, Liurther	certify that the	Information

The court of this arround report or supplied with first line and quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this arroual report or suppliemental 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.

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