FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 31 AM 11:21

DOCUMENT # **G43376** **(4)**

1. Corporation Name
BLUE HERON IRRIGATION, INC.

Principal Place of Business	Mailing Address
114 CORPORATION WAY VENICE FL 34292	114 CORPORATION WAY VENICE FL 34292

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/13/1983
3a. Date of Last Report: 03/25/1994

2. Principal Place of Business
21 Blue Heron Irrigation
Suite, Apt. #, etc.
22 114 Corporation Way
City & State
23 Venice Florida
Zip 24 34292 Country 25 Sarasota

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-2297988 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LA NINFA, GERRY A
114 CORPORATION WAY
VENICE FL 34292

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City **FL** 05 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 Gerry A La Ninfa President 1-10-95
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	P	1.1 TITLE	V	☐ Change ☑ Addition
NAME	LANINFA, GERRY A.	1.2 NAME	Steel, Robert P.	
STREET ADDRESS	2809 HERMITAGE BLVD.	1.3 STREET ADDRESS	1562 Stickney Pt Rd	
CITY-ST-ZIP	VENICE FL	1.4 CITY-ST-ZIP	Sarasota, Fl 34231	
TITLE	ST	2.1 TITLE	T	☐ Change ☑ Addition
NAME	LANINFA, BARBARA A	2.2 NAME	Griffiths, Frederick N.	
STREET ADDRESS	2809 HERMITAGE BLVD	2.3 STREET ADDRESS	1554 Stickney Pt Rd	
CITY-ST-ZIP	VENICE FL	2.4 CITY-ST-ZIP	Sarasota, Fl 34231	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Gerry A La Ninfa 1-10-95 (813) 484-3400
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #