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STREET ADDRESS

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CITY-ST-ZIP

**FILED** Apr 24 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **POCUMENT #** (5)A. J.'S IRRIGATION, INCORPORATED Principal Place of Business Mailing Address 138 35TH AVENUE SOUTH 138 35TH AVENUE SOUTH JACKSONVILLE BEACH FL 32250 JACKSONVILLE BEACH FL 32250 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/27/1985 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-2520844 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Zip Country Zip Country B. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ZAMM, ALAN JESSE 138 35TH AVENUE SOUTH 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE BEACH FL 32250 83 84 City 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 CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE \_\_ Addition TITLE 1 1 TITLE Change DIEBEL, CHARLES R. NAME 1 2 NAME 217 SAN JUAN DR STREET ADDRESS 1.3 STREET ADDRESS PONTE VEDRA BEACH FL CITY-ST-ZIP 1.4 City - St - ZiP DELETE Change TITLE 2.1 TITLE Addition ZAMM, MARILYN A. NAME 2.2 NAME 138 35TH AVE., SOUTH STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE BCH. FL CITY - ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE ZAMM, ALAN J. NAME 3.2 NAME 138 35TH AVENUE, SOUTH STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE BEACH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY+ST-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME

> 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

> > 904-993-6721

loul 17th

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 eath; 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.