2001 UNIFORM BUSINESS REPORT (UBR)

Mar 12, 2001 8:00 am **DOCUMENT # J00790 Secretary of State** 1. Entity Name R & D IRRIGATION, INC. 03-12-2001 90452 027 ***150.00 Principal Place of Business Mailing Address 13599-159TH STREET,N. 13599-159TH STREET.N. JUPITER FL 33478 JUPITER FL 33478 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2563598 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RICHARD T. ROCKWOOD Street Address (P.O. Box Number is Not Acceptable) 13599 159TH ST., N. JUPITER FL 33478 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10., Election Campaign Financing. \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition ROCKWOOD, RICHARD T. NAME NAME 13599 159TH ST. N. STREET ADDRESS STREET ADDRESS CITY-ST-7IP JUPITER FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition ROCKWOOD, DAVID M. NAME NAME 13599 159TH ST. N. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL TITLE TITLE ☐ Change ☐ Addition ☐ Delete ROCKWOOD, RICHARD T. NAME NAME STREET ADDRESS 13599 159TH ST. N. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

SUSNATURE AND TYPED OR PRIVITED NAME OF SIGNING OFFICER OR DIRECTOR

3-8-0/ 262-03/7