

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J14874

Entity Name: MANNING IRRIGATION, INC.

FILED  
Apr 29, 2007  
Secretary of State

**Current Principal Place of Business:**

2583 ANNISTON ROAD  
JACKSONVILLE, FL 32246

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8572  
JACKSONVILLE, FL 32211

**New Mailing Address:**

FEI Number: 59-2669931

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MANNING, APRIL  
2724 HIDDEN CREEK DR.  
JACKSONVILLE, FL 32226 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: MANNING, DANIEL  
Address: 4141 STOWE RUN LANE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: PD ( ) Delete  
Name: MANNING, APRIL  
Address: 2724 HIDDEN CREEK DR.  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VD ( ) Delete  
Name: WILSON, NATHAN  
Address: 2724 HIDDEN CREEK DR.  
City-St-Zip: JACKSONVILLE, FL 32226

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: APRIL MANNING

PRES

04/29/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date