

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TAMPA 33604
Secretary of State
(Include the word "INCORPORATED")

APPROVED
AND
FILED

MAY - 1 1995 9:33

TALLAHASSEE, FLORIDA

DOCUMENT # **K39981** (1)
NIMBUS IRRIGATION INCORPORATED

Principal Office of Business: 741 FELLSMERE ROAD SEBASTIAN FL 32958
Mailing Address: 741 FELLSMERE ROAD SEBASTIAN FL 32958

DATE I WROTE IN THIS SPACE

3. Date Incorporated or Qualified 10/19/1988	3a. Date of Last Report 05/01/1994
4. FID Number 65-0075906	Applied For Not Applicable
5. Certificate of Status Due next ☐	\$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 information under S. 193 (1)(2) Florida Statutes ☐ Yes ☒ No	

2. Principal Office of Business 21	2a. Mailing Address 26
22. State of Inc. or Qual. 27	2b. State of Inc. or Qual. 28
23. City & State 29	24. City & State 30
25. Zip 29	26. Zip 30

9. Name and Address of Current Registered Agent GREGORY, ANDREW L. 624 FISCHER HAMMOCK ROAD SEBASTIAN FL 32958	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City, State, Zip Code FL
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11. Pursuant to the provisions of Sections 193 and 194, 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 this appointment as registered agent. I am aware of the legal obligations of this position under Florida Statutes.

SIGNATURE

(Signature of Registered Agent)

(Signature of Secretary or Director)

(Date)

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
1. NAME GREGORY, ANDREW L. 2. STREET ADDRESS 624 FISCHER HAMMOCK RD. 3. CITY, STATE, ZIP SEBASTIAN FL	☐ Change ☐ Addition
4. NAME VPS GREGORY, MARY 5. STREET ADDRESS 624 FISCHER HAMMOCK RD. 6. CITY, STATE, ZIP SEBASTIAN FL	☐ Change ☐ Addition
7. NAME 8. STREET ADDRESS 9. CITY, STATE, ZIP	☐ Change ☐ Addition
10. NAME 11. STREET ADDRESS 12. CITY, STATE, ZIP	☐ Change ☐ Addition
13. NAME 14. STREET ADDRESS 15. CITY, STATE, ZIP	☐ Change ☐ Addition
16. NAME 17. STREET ADDRESS 18. CITY, STATE, ZIP	☐ Change ☐ Addition
19. NAME 20. STREET ADDRESS 21. CITY, STATE, ZIP	☐ Change ☐ Addition
22. NAME 23. STREET ADDRESS 24. CITY, STATE, ZIP	☐ Change ☐ Addition
25. NAME 26. STREET ADDRESS 27. CITY, STATE, ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 193(1)(b), 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. I am an officer or director of the corporation or the person or person empowered to execute this report as required by Chapter 661, Florida Statutes, and that my name appears in Block 1, or Block 3, of a filing of an annual report with an address.

SIGNATURE:

Mary Gregory
SIGNATURE AND PRINTED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

5/1/95 (407) 388-5226