

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000014476

Entity Name: AQUA IRRIGATION LLC

FILED
Apr 12, 2006
Secretary of State

Current Principal Place of Business:

147 NE NARANAJA AVE
PORT SAINT LUCIE, FL 34983

New Principal Place of Business:

7548 S US1
SUITE #147
PORT SAINT LUCIE, FL 34952

Current Mailing Address:

147 NE NARANAJA AVE
PORT SAINT LUCIE, FL 34983

New Mailing Address:

7548 S US1
147
PORT SAINT LUCIE, FL 34952

FEI Number: 22-3857252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLOE, VINCENT
147 NE NARANAJA AVE
PORT SAINT LUCIE, FL 34983 US

Name and Address of New Registered Agent:

CLOE, VINCENT
7548 S US1
147
PORT SAINT LUCIE, FL 34952 US

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: VINCE CLOE

04/12/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CLOE, VINCENT
Address: 147 NE NARANAJA AVE
City-St-Zip: PORT SAINT LUCIE, FL 34983

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CLOE, VINCENT
Address: 7548 S US1
City-St-Zip: PORT SAINT LUCIE, FL 34952

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: VINCE CLOE

MGR

04/12/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date