

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064460

FILED
Jan 13, 2009
Secretary of State

Entity Name: PROFESSIONAL IRRIGATION, LLC

Current Principal Place of Business:

3658 NW 18TH AVENUE
OAKLAND PARK, FL 33309

New Principal Place of Business:

Current Mailing Address:

3658 NW 18TH AVENUE
OAKLAND PARK, FL 33309

New Mailing Address:

FEI Number: 20-3084958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD
STE A
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD STE A
BOX 1377822
DELTONA, FL 32725 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: CHRISTINA CLARK FOR ALL FLORIDA FIRM, INC

01/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MORRELL, DALE N
Address: 3658 NW 18TH AVE
City-St-Zip: OAKLAND PARK, FL 33309

ADDITIONS/CHANGES:

Title: O (X) Change () Addition
Name: MORRELL, DALE N
Address: 3658 NW 18TH AVE
City-St-Zip: OAKLAND PARK, FL 33309

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 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: CHRISTINA CLARK FOR DALE MORRELL

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01/13/2009

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