2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# M79727

Entity Name: COLLIER IRRIGATION SERVICE, INC.

Current Principal Place of Business:

3522 PLOVER AVENUE
NAPLES, FL 34117 US

New Principal Place of Business:

Current Mailing Address:

3522 PLOVER AVENUE
NAPLES, FL 34117 US

New Mailing Address:

FEI Number: 65-0053996 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMSON, ROBERT L.
5675 CEDARTREE LAND
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

WILLIAMSON, ROBERT L.
5675 CEDARTREE LANE
NAPLES, FL 34116 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: _____ 04/28/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: WILLIAMSON, ROBERT L, .
Address: 5675 CEDARTREE LN
City-St-Zip: NAPLES, FL 34116

Title: DVS ( ) Delete
Name: WILLIAMSON, SHERRY D, .
Address: 5675 CEDARTREE LN
City-St-Zip: NAPLES, FL 34116

Title: AS ( ) Delete
Name: BUDD, DAVID G
Address: 3033 RIVIERA, SUITE 201
City-St-Zip: NAPLES, FL 34103

Title: D (X) Delete
Name: WILLIAMSON, DANIEL J
Address: 5675 CEDARTREE LN
City-St-Zip: NAPLES, FL 34116

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:

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

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 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: SHERRY D. WILLIAMSON DVS 04/28/2006
Electronic Signature of Signing Officer or Director — Date