## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N13134

FILED Jan 07, 2006 Secretary of State

Entity Name: MAINLANDS SECTION 6 IRRIGATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4920 N.W. 51ST COURT TAMARAC, FL 33319 **Current Mailing Address: New Mailing Address:** 4920 N.W. 51ST COURT TAMARAC, FL 33319 FEI Number: 59-2620503 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARRINGTON, EDWIN 5206 NW 49 AVE TAMARAC, FL 33319 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HARRINGTON, EDWIN Name: Name: 5206 NW 49 AVENUE Address: Address: City-St-Zip: TAMARAC, FL 33319 US City-St-Zip: Title: VD () Delete Title: VD (X) Change ( ) Addition STEVENS, DONALD Name: RINARD, LESLIE Name: Address: 5308 NW 49 AVE. Address: 5310 NW 49 AVE. City-St-Zip: TAMARAC, FL 33319 US City-St-Zip: TAMARAC, FL 33319 US Title: () Delete Title: () Change () Addition ZANGMEISTER, FRED Name: Name: Address: 5311 N.W. 49 TERRACE Address: City-St-Zip: TAMARAC, FL 33319 US City-St-Zip: Title: TD ( ) Delete Title: TD (X) Change ( ) Addition GOLEMBIEWSKI, CLARENCE Name: Name: MINERMAN, ADA LOU 5200 NW 49 AVE. 4920 NW 49 ROAD Address: Address: City-St-Zip: TAMARAC, FL 33319 US City-St-Zip: TAMARAC, FL 33319 US Title: () Delete Title: (X) Change ( ) Addition MCCARTHY, GEORGE STAPLETON, EDMUND Name: Name: 4811 NW 49TH RD 4928 NW 55 STREET Address: Address: City-St-Zip: TAMARAC, FL 33319 US City-St-Zip: TAMARAC, FL 33319 US Title: () Delete Title: (X) Change ( ) Addition MCCARTHY, GEORGE RINARD, LESLIE Name: Name: Address: 5310 N.W. 49 AVENUE Address: 4811 NW 49 ROAD TAMARAC, FL 33319 US TAMARAC, FL 33319 US City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWIN S. HARRINGTON P 01/07/2006