

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000068318

FILED  
Sep 14, 2004  
Secretary of State

Entity Name: SUREFLOW IRRIGATION, INC.

**Current Principal Place of Business:**

2316 PINE RIDGE RD #462  
NAPLES, FL 34109

**New Principal Place of Business:**

733 PINE CONE LN  
NAPLES, FL 34104

**Current Mailing Address:**

2316 PINE RIDGE RD #462  
NAPLES, FL 34109

**New Mailing Address:**

4001 SANTA BARBARA BLVD #177  
NAPLES, FL 34104

FEI Number: 01-0704900

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DALEY, JEFF  
2316 PINE RIDGE RD #462  
NAPLES, FL 34109

**Name and Address of New Registered Agent:**

WORKMAN, CHRISTOPHER M  
4001 SANTA BARBARA BLVD #177  
NAPLES, FL 34104

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: CHRISTOPHER M WORKMAN

09/14/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DALEY, JEFF  
Address: 2316 PINE RIDGE RD #462  
City-St-Zip: NAPLES, FL 34109

Title: D (X) Delete  
Name: WORKMAN, CHRIS  
Address: 2316 PINE RIDGE RD #462  
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: WORKMAN, CHRISTOPHER M  
Address: 4001 SANTA BARBARA BLVD #177  
City-St-Zip: NAPLES, FL 34104

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 Section 119.07(3)(i), 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: CHRISTOPHER M WORKMAN

D

09/14/2004

Electronic Signature of Signing Officer or Director

Date