

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000116975

FILED
Jan 20, 2007
Secretary of State

Entity Name: THOMAS NEMETH IRRIGATION, INC.

Current Principal Place of Business:

P.O. BOX 1122
LAKE PLACID, FL 33862

New Principal Place of Business:

118 FIG ROAD N.W.
LAKE PLACID, FL 33852

Current Mailing Address:

P.O. BOX 1122
LAKE PLACID, FL 33862

New Mailing Address:

FEI Number: 51-0488120 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NEMETH, PEGGY E
118 FIG ROAD NW
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: NEMETH, THOMAS R
Address: P.O. BOX 1122
City-St-Zip: LAKE PLACID, FL 33862

Title: VP () Delete
Name: NEMETH, PEGGY E
Address: P.O. BOX 1122
City-St-Zip: LAKE PLACID, FL 33862

Title: TREAS () Delete
Name: NEMETH, THOMAS R
Address: P.O. BOX 1122
City-St-Zip: LAKE PLACID, FL 33862

Title: SEC () Delete
Name: NEMETH, PEGGY E
Address: P.O. BOX 1122
City-St-Zip: LAKE PLACID, FL 33862

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: PEGGY NEMETH

VP

01/20/2007

Electronic Signature of Signing Officer or Director

_____ Date