## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P03000136852  1. Entity Name DIRT & WATER, INC.							FILED 05 JUN 20 ANTI: 49					
Principal Place of Business 3045 - 10TH ST. N. ST. PETERSBURG, FL 33704			Mailing Address 2075 BAYOU GRANDE BLVD NE ST. PETERSBURG, FL 33703			TALLAMASSEE, FLORICA						
2. Principal Pl 2075 Ba	lace of Busin	ness ande Blvd. NE	3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			06172005	Chg-P	CR2E	34 (10/03)			
City & State St. Petersburg, FL			City & State				4. FEI Numb 20-041			<u> </u>	plied For at Applicable	
Zip 33703		Country	Zip	Count			<u> </u>	of Status Desired		\$8.75 Add Fee Require		
	6. Name	and Address of Current F	Registered Agent	Jistered Agent			7. Name and Address of New Registered Agent Name					
BYRNE, JA 540 - 4TH : ST. PETER	STREET				Street Address (P.O. Box Number is Not Acceptable)							
	,	. 2 33731				FL Zip Code						
8. 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. I am familiar with, and accept												
the obligations of registered agent.  SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  DATE												
Amended AR is \$61.25  9. Election Campaign Finar Trust Fund Contribution.						\$5. Add	.00 May Be ed to Fees					
10.	OFFICERS AND DIRECTORS 11.					DDC		CHANGES TO O	FFICERS AND			
TITLE NAME	D St Delete TITL NAM					DPST ☐ Change						
STREET ADDRESS : CITY-ST-ZIP	3045 - 10 ST. PETE	-	EET ADDRESS Y-ST-ZIP		075 Bayou Grande Blvd. NE							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		LE AE EET ADDRESS Y-ST-ZIP										
THLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete IIILI NAM STRE CITY						06/2403 01041 003 4*61.25					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete				€1 06/2	0005E 4/05010	509: 41003	□ Change 3 <b>66</b> **61.	□ Addition 26	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		_					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		f					☐ Change	☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 repulified by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.												
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date  Date  Dayland Proce * Manual Control of the Contro												