2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2006 08:00 AM Secretary of State

ANNUAL REPORT				Secretary of State
DOCUMENT # P03000156786				
1. Entity Name			{	
ALL PRO	IRRIGATION, INC.			
		-		
Principal Place	of Business M	lailing Address		1
108 FETTING AVENUE 108 FETTING AVENUE				
FT. WALTON I	BEACH, FL 32547	T. WALTON BEACH, FL 3254	7	
	·			
DO NOT WRITE IN THIS SPACE				04032008 No Chg-P CR2E034 (11/05)
v	O NO! WRITE I	N ITIO SPA	C _E	4. FEI Number Applied For
			·	56-2428151 Not Applicable 5 Certificate of Status Desired T \$8.75 Additional
		های در این از از این از ای ماهند در این از ای		5. Certificate of Status Desired Fee Required
	5. Name and Address of Current Regis	stered Agent	-	
BRYANT, DOCK L				DO NOT MOITE
57 YACHT CLUB DRIVE				DO NOT WRITE
FT. WALT	ON BEACH, FL 32547	•	}	IN THIS SPACE
		•		
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.				
4				
Signature: typed or pointed name of registered agent and title of applicable (NOTE: Registered Agent signature required when relinatating) DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to				5.00 May Be ded to Fees
10.	OFFICERS AND DIRE	in the		
TOTALE	P,D	OTORS .	1	· · · · · · · · · · · · · · · · · · ·
NAME	BRYANT, DOCK L	• •	ł	11000000011201
STREET ADDRESS CITY-SI-ZIP	57 YACHT CLUB DRIVE	· —	ı	U00000511354 04/29/06-80047-805 150.80
THILE	FT. WALTON BEACH, FL 32547		-{	
NAME	BRYANT, TIMOTHY L	,	· I	2 de 1
STREET ADDRESS	4285 BARLOW ROAD	•	j	
CITY-ST-20P	CRESTVIEW, FL 32535	_ _	4	: : : : : : : : : : : : : : : : : : :
TITLE NAME	STD BRYANT, PATRICIA A	- 4	1	
STREET ACCORESS	57 YACHT CLUB DRIVE	, :	j	DO NOT WOITE
C17Y-S7-Z7P	FT. WALTON BEACH, FL 32547	<u></u>		DO NOT WRITE
TITLE			ł	IN THIS SPACE
NAME STREET ADDRESS	1		1	
CITY-ST-ZIP		-	1	
TITLE			1	
NAME			į	***
STREET ADDRESS CATY-ST-ZAP			1	
TIRLE			1	
NAME	1		1	•
STREET ADDRESS	}		3	
CITY-ST-ZIP	<u> </u>	Pri: J	1	and in Chanta 440. Florida Carta and Art and A
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under gath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				
changed	a peranon or the receiver of musiee empower I, or on an attachment with an address, with	all other like empowered.	инец ву спартег БС	ov, nonce alemes, and thermy reme appears in plack to dridlock titll

STRATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _