

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000017391

Entity Name: FIVE STAR IRRIGATION SERVICES, INC.

**FILED**  
**Jun 26, 2008**  
**Secretary of State**

## **Current Principal Place of Business:**

% MARK BOUREN  
11683 MAHOGANY RUN  
FT MYERS, FL 33913

## **New Principal Place of Business:**

MARK BOUREN  
13605 EAGLE RIDGE DRIVE #3715  
FT MYERS, FL 33912

## **Current Mailing Address:**

% MARK BOUREN  
11683 MAHOGANY RUN  
FT MYERS, FL 33913

## **New Mailing Address:**

MARK BOUREN  
P.O. BOX 152481  
CAPE CORAL, FL 33915

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

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

BOUREN, MARK  
11683 MAHOGANY RUN  
FT MYERS, FL 33913    US

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

BOUREN, MARK  
13605 EAGLE RIDGE DRIVE #3715  
FT MYERS, FL 33912    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: MARK BOUREN

06/26/2008

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:                      PD                      ( ) Delete  
Name:                      BOUREN, MARK  
Address:                      11683 MAHOGANY RUN  
City-St-Zip:                      FT MYERS, FL 33913

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title:                      PD                      (X) Change ( ) Addition  
Name:                      BOUREN, MARK  
Address:                      P.O. BOX 152481  
City-St-Zip:                      CAPE CORAL, FL 33915

Title:                      VP                      ( ) Change (X) Addition  
Name:                      EVELAND, HELEN  
Address:                      P.O. BOX 152481  
City-St-Zip:                      CAPE CORAL, FL 33915

I hereby certify that the information supplied with this filing does not qualify 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: MARK BOUREN

P

06/26/2008

Electronic Signature of Signing Officer or Director

Date