

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030494

FILED  
Jul 29, 2011  
Secretary of State

**Entity Name:** BEACHSIDE IRRIGATION SERVICES, INC.

**Current Principal Place of Business:**

5356 MARE CREEK DR.  
CRESTVIEW, FL 32539

**New Principal Place of Business:**

109 CAPRI CV. E.  
NICEVILLE, FL 32578

**Current Mailing Address:**

5356 MARE CREEK DR.  
CRESTVIEW, FL 32539

**New Mailing Address:**

109 CAPRI CV. E.  
NICEVILLE, FL 32578

**FEI Number:** 68-0578265

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLACKBURN, JOHN S  
5356 MARE CREEK DR.  
CRESTVIEW, FL 32539 US

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

BLACKBURN, JOHN S  
109 CAPRI CV. E.  
NICEVILLE, FL 32578 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: JOHN S. BLACKBURN

07/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BLACKBURN, JOHN S  
Address: 109 CAPRI CV. E.  
City-St-Zip: NICEVILLE, FL 32578

Title: VP  
Name: BLACKBURN, JAMES B  
Address: 5541 KERVIN RD.  
City-St-Zip: CRESTVIEW, FL 32539

Title: O  
Name: WAGGONER, DANIEL S  
Address: 5356 MARE CREEK DR.  
City-St-Zip: CRESTVIEW, FL 32539

I hereby 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 all other like empowered.

SIGNATURE: JOHN S. BLACKBURN

P

07/29/2011

Electronic Signature of Signing Officer or Director

Date