

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000092488

**FILED**  
**Oct 06, 2005**  
**Secretary of State**

**Entity Name:** C & S IRRIGATION AND LANDSCAPING COMPANY, INC.

**Current Principal Place of Business:**

8055 SAW PALMETTO LANE  
BOYNTON BEACH, FL 33436

**New Principal Place of Business:**

7180 COLONY CLUB DRIVE  
#105  
LAKE WORTH, FL 33463

**Current Mailing Address:**

8055 SAW PALMETTO LANE  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

7180 COLONY CLUB DRIVE  
#105  
LAKE WORTH, FL 33463

**FEI Number:** 20-1279242

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HANES, CHRIS  
8055 SAW PALMETTO LANE  
BOYNTON BEACH, FL 33436 US

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

HANES, CHRIS  
7180 COLONY CLUB DRIVE  
#105  
LAKE WORTH, FL 33463 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:** CHRIS HANES

10/06/2005

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:** HANES, CHRIS  
**Address:** 8055 SAW PALMETTO LANE  
**City-St-Zip:** BOYNTON BEACH, FL 33436

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

**Title:** PD (X) Change ( ) Addition  
**Name:** HANES, CHRIS  
**Address:** 7180 COLONY CLUB DRIVE  
**City-St-Zip:** LAKE WORTH, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the 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 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:** CHRIS HANES

PD

10/06/2005

Electronic Signature of Signing Officer or Director

Date