

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000135850**

1. Entity Name

DAVID GOING IRRIGATION, INC.



Principal Place of Business

6321 102ND TERRACE  
PINELLAS PARK, FL 33782

Mailing Address

6321 102ND TERRACE  
PINELLAS PARK, FL 33782



03042006 No Chg-P CR2E034 (11/05)

4. FEI Number

20-1683151

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

GOING, DAVID L  
6321 102ND TERRACE  
PINELLAS PARK, FL 33782

**DO NOT WRITE  
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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000471862  
03/29/06-80014-001 150.00

10. OFFICERS AND DIRECTORS

TITLE P  
NAME GOING, DAVID L  
STREET ADDRESS 6321 102ND TERRACE  
CITY-ST-ZIP PINELLAS PARK, FL 33782

TITLE VP  
NAME GOING, DARIN S  
STREET ADDRESS 4850 84TH TERRACE  
CITY-ST-ZIP PINELLAS PARK, FL 33781

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 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 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

Daytime Phone #

*David L. Going* DAVID L. GOING 3/14/06