2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000156268

Entity Name: PEE WEE'S IRRIGATION OF MARION COUNTY INC.

FILED May 22, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1117 NE 6TH STREET P. O. BOX 5987

OCALA, FL 34470 OCALA, FL 34478 US

Current Mailing Address: New Mailing Address:

3101 SW 34TH AVENUE P. O. BOX 5987 905-437 OCALA, FL 34478

903-437 OCALA, FL 34478

FEI Number: 20-1880163 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

 ECKARDT, DIANA
 BEHAN, GERARD

 1117 NE 6TH STREET
 P. O. BOX 5987

 OCALA, FL 34470
 US

 OCALA, FL 34478
 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: GERARD BEHAN 05/22/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P/D
 () Delete
 Title:
 P/D
 (X) Change () Addition

 Name:
 ECKARDT, DIANA
 Name:
 BEHAN, GERARD

 Address:
 1117 NE 6TH STREET
 Address:
 P. O. BOX 5987

 Address:
 1117 NE 6TH STREET
 Address:
 P. O. BOX 5987

 City-St-Zip:
 OCALA, FL 34470
 City-St-Zip:
 OCALA, FL 34478 US

Title: VP/D () Delete Title: D (X) Change () Addition

 Name:
 BEHAN, GERARD
 Name:
 ECKARDT, DIANA

 Address:
 3101 SW 34TH AVENUE, #905-437
 Address:
 P. O. BOX 6972

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:
 OCALA, FL 34478 US

I hereby certify that the information supplied with this filing does not qualify for the 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: DIANA ECKARDT D 05/22/2006