2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000033530

Entity Name: CORNERSTONE IRRIGATION INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2120 US 1 S STE 115 6603 SOLOMON RD

ST AUGUSTINE, FL 32086 JACKSONVILLE, FL 32234

Current Mailing Address: New Mailing Address:

2120 US 1 S STE 115 6603 SOLOMON RD

ST AUGUSTINE, FL 32086 JACKSONVILLE, FL 32234

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

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

GILL, HEATHER DIANNE GILL, CHRISTOPHER D T 383 PALM AVE 6603 SOLOMON RD

BALDWIN, FL 32234 JACKSONVILLE, FL 32234 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: CHRISTOPHER GILL 04/27/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Name: Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title:

GILL, HEATHER D GILL, HEATHER D Name: Name: 383 PALM AVE 6603 SOLOMON RD Address: Address: City-St-Zip: BALDWIN, FL 32234 City-St-Zip: JACKSONVILLE, FL 32234

Title: Title: () Delete (X) Change () Addition

GILL, CHRISTOPHER D Name: Name: GILL. CHRISTOPHER D 383 PALM AVE 6603 SOLOMON RD Address: Address: BALDWIN, FL 32234 JACKSONVILLE, FL 32234 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete

STRENGTH, JOHN A JR. STRENGTH, JOHN A JR. Name: Name: 4037 OLD TIME PL. 4037 OLDE TYME PL. Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068

Title: () Delete Title: () Change () Addition

SMITH, ALLEN Name: 5711 PEARL ST Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip:

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: CHRISTOPHER GILL 04/27/2006 Τ