

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000092493

Entity Name: MAINLINE IRRIGATION INC.

FILED
Sep 14, 2006
Secretary of State

Current Principal Place of Business:

3204 MCLAIN LN
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

3204 MCLAIN LN
PACE, FL 32571

New Mailing Address:

FEI Number: 06-1750433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAERRESEN, MICHAEL H
3204 MCLAIN LN
PACE, FL 32571 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAERRESEN, MICHAEL H
Address: 3204 MCLAIN LN.
City-St-Zip: PACE,, FL 32571 US

Title: VP () Delete
Name: YATES JR., ROBERT E
Address: 3204 MCLAIN LANE
City-St-Zip: PACE, FL 32571 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: BAERRESEN, JON H
Address: 7250 HILBURN RD. APT, 2-D
City-St-Zip: PENSACOLA, FL 32504 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: MICHAEL H. BAERRESEN

P

09/14/2006

Electronic Signature of Signing Officer or Director

Date