

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000042738

FILED
Apr 30, 2007
Secretary of State

Entity Name: CODY TUCKER IRRIGATION INC.

Current Principal Place of Business:

5202 N. POEL RD.
PLANT CITY, FL 33565

New Principal Place of Business:

6508 KNIGHTS GRIFFIN RD
PLANT CITY, FL 33565

Current Mailing Address:

5202 N. POEL RD.
PLANT CITY, FL 33565

New Mailing Address:

6508 KNIGHTS GRIFFIN RD
PLANT CITY, FL 33565

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUCKER, CODY
5202 N. POEL RD.
PLANT CITY, FL 33565 US

Name and Address of New Registered Agent:

TUCKER, CODY
6508 KNIGHTS GRIFFIN RD
PLANT CITY, FL 33565 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: CODY TUCKER

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TUCKER, CODY
Address: 5202 N. POEL RD.
City-St-Zip: PLANT CITY, FL 33565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TUCKER, CODY
Address: 6508 KNIGHTS GRIFFIN RD
City-St-Zip: PLANT CITY, FL 33565

I hereby certify that the information supplied with this filing does not qualify 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: CODY TUCKER

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

Date