2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2008 8:00 am
Secretary of State

04-24-2008 90113 016 ***150.00

DOCUMENT # P06000131871

1. Entity Name
EDWARDS IRRIGATION SERVICES, INC.

Principal Place of Business	Mailing Address
10201 W. BEAVER ST #42 JACKSONVILLE, FL 32220 US	10201 W. BEAVER ST #42 JACKSONVILLE, FL 32220 US

04172008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5259 Hammock Lake Drive	5259 Hammock Lake Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville FL	City & State: Jacksonville FL
Zip: 32226 Country: USA	Zip: 32226 Country: USA

4. FEI Number: 20-5720407 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required.

6. Name and Address of Current Registered Agent

EDWARDS, JERRY L
10201 W. BEAVER ST #42
JACKSONVILLE, FL 32220

7. Name and Address of New Registered Agent

Name: Edwards, Jerry L.
Street Address (P.O. Box Number is Not Acceptable): 5259 Hammock Lake Drive
City: Jacksonville FL Zip Code: 32226

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: Jerry L. Edwards 4/21/08
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, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD EDWARDS, JERRY L 10201 W. BEAVER ST #42 JACKSONVILLE, FL 32220 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5259 Hammock Lake Drive Jacksonville, FL 32226
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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: Jerry L. Edwards 5-18-08 904-568-4756
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #