

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Montiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P35501

(6)

1. Corporation Name

JAMES HARDIE IRRIGATION, INC.



Principal Place of Business

27671 LA PAZ
LAGUNA NIGUEL CA 92656

Mailing Address

241 RIDGE ST
4TH FLOOR
RENO NV 89501
US

2. Principal Place of Business

21 Subj. App. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Subj. App. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified
09/11/1991

3a. Date of Last Report
03/10/1995

4. FEI Number

88-0268383

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

X Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 PINE ISLAND RD.
PLANTATION FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1 NAME
P
PAROD RICK
27671 LA PAZ
LAGUNA NIGUEL CA 92656

☐ DELETE

2 NAME
TD
BORGARDT, BRYON G
26300 LAALAMEDA STE 250
MISSION VIEJO CA

☐ DELETE

3 NAME
S
MORGAN KARL
27671 LA PAZ
LAGUNA NIGUEL CA 92656

☐ DELETE

4 NAME
D
MACDONALD, PETER
26300 LA ALAMEDA STE 250
MISSION VIEJO CA

☐ DELETE

5 NAME
6 NAME
7 NAME
8 NAME
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10 NAME
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 NAME ☐ Change ☐ Addition

12 NAME ☐ Change ☐ Addition

13 STREET ADDRESS ☐ Change ☐ Addition

14 CITY, ST, ZIP ☐ Change ☐ Addition

15 NAME ☐ Change ☐ Addition

16 NAME ☐ Change ☐ Addition

17 STREET ADDRESS ☐ Change ☐ Addition

18 CITY, ST, ZIP ☐ Change ☐ Addition

19 NAME ☐ Change ☐ Addition

20 NAME ☐ Change ☐ Addition

21 STREET ADDRESS ☐ Change ☐ Addition

22 CITY, ST, ZIP ☐ Change ☐ Addition

23 NAME ☐ Change ☐ Addition

24 NAME ☐ Change ☐ Addition

25 STREET ADDRESS ☐ Change ☐ Addition

26 CITY, ST, ZIP ☐ Change ☐ Addition

27 NAME ☐ Change ☐ Addition

28 NAME ☐ Change ☐ Addition

29 STREET ADDRESS ☐ Change ☐ Addition

30 CITY, ST, ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this and on report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bryon G. Borgardt Treasurer 2/15/96 (714)348-1800

CR2E034 (12/95)