

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 JUL 19 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-07/25/95--01019--020
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DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000063964(8)

1. Corporation Name

KILPATRICK IRRIGATION SUPPLY COMPANY, INC.

Principal Place of Business

Mailing Address

322 N. E. 3rd Street
Boynton Beach, FL 33435

322 N. E. 3rd Street
Boynton Beach, FL 33435

2. Principal Place of Business

2a. Mailing Address

21

26

Suite Apt # etc

Suite Apt # etc

22

27

City & State

City & State

23

28

Zip

County

Zip

County

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
08/30/94

3a. Date of Last Report

4. FEI Number
65-0522551

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. 199.035,
Florida Statutes ☐ Yes ☐ No

Strawn, Joel T.
54 N. E. 4th Avenue
Delray Beach, FL 33483

10. Name and Address of New Registered Agent

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 607.0505, Florida Statutes.

SIGNATURE

(If officer, please sign; if not, please sign as registered agent or both.)

(If registered agent, please sign; if not, please sign as officer or both.)

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

12a

NAME

STREET ADDRESS

CITY, STATE, ZIP

13a

NAME

STREET ADDRESS

CITY, STATE, ZIP

D/P

Kilpatrick, Harold D., Sr.
1750 Lake Drive
Delray Beach, FL 33444

☒ Change ☐ Addition

13b

NAME

STREET ADDRESS

CITY, STATE, ZIP

EVP

Kilpatrick, Tim L.
1725 Lake Drive
Delray Beach, FL 33444

☒ Change ☐ Addition

13c

NAME

STREET ADDRESS

CITY, STATE, ZIP

VP

Kilpatrick, Jon W.
425 N. W. 18th Street
Delray Beach, FL 33444

☒ Change ☐ Addition

13d

NAME

STREET ADDRESS

CITY, STATE, ZIP

VP

Morris, John R.
8541 N. Lake Dasha Drive
Plantation, FL 33324

☐ Change ☒ Addition

13e

NAME

STREET ADDRESS

CITY, STATE, ZIP

☐ Change ☒ Addition

13f

NAME

STREET ADDRESS

CITY, STATE, ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.035, Florida Statutes. I further certify that the information contained on this annual report is supplemental annual report, and is not a change of address, 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 officer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of officers or directors of the corporation as required by Chapter 607, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harold D. Kilpatrick, Sr., President

6/29/95 407-732-9815