

5-15-97 B-7314-C  
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May 15 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000094170 (5)

1. Corporation Name

REISINGER BROTHERS IRRIGATION INC.

Principal Place of Business

1250 SE 8TH STREET  
CAPE CORAL FL 33980

Mailing Address

1250 SE 8TH STREET  
CAPE CORAL FL 33980-2856

3. Date Incorporated or Qualified

12/29/1994

3a. Date of Last Report

04/10/1996

2. Principal Place of Business

21 114 S. Bedford St

2a. Mailing Address

26 114 S. Bedford St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Carlisle PA

City & State

28 Carlisle PA

Zip

Country

24 17013

25 USA

Zip

Country

29 17013

30 USA

9. Name and Address of Current Registered Agent

REISINGER, JONATHAN  
1250 SE 8TH STREET  
CAPE CORAL FL 33980

10. Name and Address of New Registered Agent

81 Name James Voss  
82 Street Address (P.O. Box Number is Not Acceptable) 16450 San Carlos Blvd #3  
83  
84 City Ft Myers FL 85 Zip Code 33908

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

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	REISINGER, JONATHAN
STREET ADDRESS	1250 SE 8TH STREET
CITY - ST - ZIP	CAPE CORAL FL 33980
TITLE	D
NAME	REISINGER, PAMELA
STREET ADDRESS	1250 SE 8TH STREET
CITY - ST - ZIP	CAPE CORAL FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D
1.2 NAME	Reisinger, Jonathan
1.3 STREET ADDRESS	114 S. Bedford St
1.4 CITY - ST - ZIP	Carlisle, PA 17013
2.1 TITLE	D
2.2 NAME	Reisinger, Pamela
2.3 STREET ADDRESS	114 S. Bedford St
2.4 CITY - ST - ZIP	Carlisle, PA 17013
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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:

Pamela Reisinger  
Pamela Reisinger 4/24/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0404899

CR2E034 (9/96)