FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96
1. Corporation Name
GALLINA IRRIGATION, INC. P9600005428 (3)

FILED Mar 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							•	# 1841/1861 FIRE TRIVE BLAN GRAIN BRAIN BRAIN BRAIN GRAIN GRAIN GRAIN BRAIN 1961
907 BLANDING BLVD P O BOX 202 ORANGE PARK FL 32065			D	P O BOX 605 DOCTORS INLET FL 32030 US				DO NOT WRITE IN THIS SPACE
US								3. Date incorporated or Qualified 01/16/1996
2. Principal Place of Business 21				2a, Mailing Address 26				4. FEI Number Applied For 59-3361625 Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired See Regulred
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country				Zip Cour			,	This corporation owes or has paid the current year Intangible
24	<u></u>	25	29	r	30			Personal Property Tax due June 30. A Yes No
24	9. Name and Address of Current Registered Agent				1001			10. Name and Address of New Registered Agent
WA	TSON, TOD					B1	Name	
		DOWS WAY STE 1	07					(D.O. D. Al subscite Abd Assessable)
JACKSONVILLE FL 32258						82 83	Street Addre	ress (P.O. Box Number is Not Acceptable)
						84	City	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 apr familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE / SULVE / SOLUTION GUNA GALUNA								
-	oneture, typed o					d Age	ariuper erutengia Ine	red when reinstaling) DATE
12.	D	OFFICERS A	ND DIREC	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change
TATLE	GALLINA	GHY		☐ Deceie	1.1 TI			Change Adultion
NAME	999 NETTEDING COLIDT			1.2 NAM			1000000	
ADAMGE DADK EL 22072				1.3 STREET ADI 1.4 City-St-Z				
CITY-ST-ZIP TITLE	ip Oldstor I rate i E debio			DELETE 2.1 T(51-ZIP	☐ Change ☐ Addition
NAME				221			i	Committee Commit
							ADDRESS	
STREET ADDRESS					2. 4 CITY - 5			
CITY-ST-ZIP TITLE				DELETE 3.17			31-21	Change Addition
NAME					3.2 N			
STREET ADDRESS							ADDRESS	†
CITY-ST-ZIP							ST - ZiP	
TITLE	······································			DELETE	4.1 TI		J. L.	☐ Change ☐ Addition
NAME					4. 2 N	AME	1	
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NAME					5.2 N	ME		
STREET ADDRESS					5.3 ST	REET	ADDRESS	
CITY-ST-ZIP					5.4 C	TY-S	IT-ZIP	
TITLE	7			☐ DELETE	6.1 Tr			Change Addition
NAME					6.2 N/	ME		
STREET ADDRESS					6.3 ST	AEET	ADDRESS	•
CITY-ST-ZIP				6.4 CITY			T-ZIP	
## I horoby o	ortify that the	Information aumolical	with this fi	line does not qualify f	or the eve	mn	tion stated in S	Section 119.07(3Vi) Florida Statutes I further certify that the information

In nereby certify that the information supplied with this filling 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 is expensively an 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.