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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000103785 (7)

ISLAND IRRIGATION & PUMP, INC.

FILED	
Apr 02 1998 8:00a	am
Secretary of Stat	e



-11016 176TH		11318-1787H-RD N-				
8512 SE DRIFTWOOD ST		JUPITER FL 33478 P.O. BOX 1132	,	DO NOT WRITE IN THI	DO NOT WRITE IN THIS SPACE	
Hoar S	OUND FL 33455	Home Court	C 2247C-11	3. Date Incorporated or Qualified		
nose so	unp, re 05 100	HOBE SOUND	PL SOTISTI	01/01/1997		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0719169	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27	··· ·	6. Certificate of Status Desired	Fee Required	
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Ζip	Country	Zip	Country	8. This corporation owes or has paid the o		
24	25	29	30	Personal Property Tex due June 30.	Yes No	
g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 Name						
	LF, JOHN R III		o Name			
l	118 178TH RD N		82 Street /	Address (P.O. Box Number is Not Acceptable)		
j JUF	PITER FL 33478		83 85/	2 SE DRIFTWOOD ST.		
			63			
			84 City		85 Zip Code	
			1101	BE SOUND F		
office or re	egistered agent, or both, in the Sta	ite of Florida. Such change was a	authorized by the corp	corporation submits this statement for the purpose poration's board of directors. I hereby accept the a	of changing its registered poointment as 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 the it applicable (NOT NOT DIRECTORS	E: Registered Agent signature	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AI	VID DIDECTORS IN 12	
12.	B	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AI	Change Addition	
NAME	WOLF, JOHN R III		1.2 NAME		23 1.12.131	
STREET ADDRESS	11318 178TH RD N		1.3 STREET ADDRESS	8512 SE DRIFTWOODST		
CITY-ST-ZIP	JUPITER FL 33478		1.4 CITY-ST-ZiP	HOBE SOUND FL 33455	1	
TITLE	ST ST	DELETE	2.1 TITLE	THOSE SCIND FC 00100	Change Addition	
NAME	WOLF, DEBBIE L		2.2 NAME			
STREET ADDRESS	11318 178TH RD N		2.3 STREET ADDRESS	8512 SE DRIFTWOODST		
CITY-ST-ZIP	JUPITER FL 33478		2.4 CITY-ST-ZIP	HOBE SOUND FL 33455		
TITLE	0011161116 00110	☐ DELETE	3.1 TITLE	THOSE SMAN PE 33133	Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
City-ST-ZIP			3.4. CITY-ST-ZIP	•."		
TITLE		☐ D£LETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS		[
CITY-ST-ZIP			4.4 CITY-ST-ZIP		1	
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			52 NAME	4.)		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			64 CITY-ST-ZIP			

14. I 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.