## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

## **FILED** Apr 03, 2006 08:00 AM Secretary of State **DOCUMENT # P98000026869** HETZEL IRRIGATION, INC. Principal Place of Business Mailing Address PO BOX 530427 PO BOX 530427 LAKE PARK, FL 33403 LAKE PARK, FL 33403 01192006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FFI Number 65-1002119 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE HETZEL, DAVID W 413 NORTHLAKE DR NORTH PALM BEACH, FL 33408 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am famillar with, and accept the obligations of registered agent (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Taust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE HETZEL, DAVID W STREET ADDRESS 413 NORTHLAKE DR NORTH PALM BEACH, FL 33408 CITY-ST-ZIP NAME U00000487619 04/14/06-80002-003 150.**00** STREET ADDRESS CUTY-ST-IP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-21P 7f7LE

12. I hereby certify that the Information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under outh; that I am an officer or direct 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 10 or Block 11 changed, or on an attachment with an address, with all other like employeed.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-848514C

Discurre Phone #