2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State
03-05-2001 90322 035 ***150.00

DOCUMENT # P99000036749

1. Entity Name
TURF IRRIGATION PRODUCTS, INC.

Principal Place of Business	Mailing Address
3765 INVESTMENT LANE RIVIERA BEACH FL 33404	3765 INVESTMENT LANE RIVIERA BEACH FL 33404

2. Principal Place of Business	3. Mailing Address
1640 Australian Avenue	1640 Australian Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Riviera Beach, FL	Riviera Beach FL
Zip 33404 / Country Palm Beach	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0945678 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
AVIS, DEBORAH 3765 INVESTMENT LN RIVIERA BEACH FL 33404	Name: Deborah Avis Street Address (P.O. Box Number is Not Acceptable): 1640 Australian Avenue City: Riviera Beach FL Zip Code: 33404

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.

SIGNATURE: _____ Feb. 6, 2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MARX, GRETCHEN	NAME	
STREET ADDRESS	~~3765 INBESTMENT LN~~ 1640 Australian Avenue	STREET ADDRESS	
CITY-ST-ZIP	~~RIVIERA BEACH FL 33404~~ Riviera Beach FL 33404	CITY-ST-ZIP	
TITLE	VD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	AVIS, DEBORAH	NAME	
STREET ADDRESS	~~3765 INBESTMENT LN~~ 1640 Australian Avenue	STREET ADDRESS	
CITY-ST-ZIP	~~RIVIERA BEACH FL 33404~~ Riviera Beach, FL 33404	CITY-ST-ZIP	
TITLE	T ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KOSSACK, MARY	NAME	
STREET ADDRESS	~~3765 INBESTMENT LN~~ 1640 Australian Avenue	STREET ADDRESS	
CITY-ST-ZIP	~~RIVIERA BEACH FL 33404~~ Riviera Beach FL 33404	CITY-ST-ZIP	
TITLE	S ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	BENOIST, JANE	NAME	
STREET ADDRESS	~~3765 INBESTMENT LN~~ 1640 Australian Avenue	STREET ADDRESS	
CITY-ST-ZIP	~~RIVIERA BEACH FL 33404~~ Riviera Beach FL 33404	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034 (10/00)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 2-6-01 (561) 844-1002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #