

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000092525

Entity Name: IRRIGATION SOLUTIONS INC.

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

453 GLENWOOD RD  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

453 GLENWOOD RD  
DELAND, FL 32720

**New Mailing Address:**

FEI Number: 59-3605818

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SKAGGS, JENNIFER  
453 GLENWOOD RD  
DELAND, FL 32720 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P/S  
Name: SKAGGS, JENNIFER R  
Address: 453 GLENWOOD RD  
City-St-Zip: DELAND, FL 32720

Title: VP/T  
Name: SKAGGS, NATHAN T  
Address: 453 GLENWOOD RD  
City-St-Zip: DELAND, FL 32720

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER SKAGGS

PRES

04/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date