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

PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S35942

1. Corporation Name

D.

FILED Apr 22, 1999 8:00 am Secretary of State 04-22-1999 90132 014 \*\*\*150.00

SUN IRRIGATION SERVICES, INC.					
MASUN SERVICES					
Principal Place	e of Business	Mailing Address	<del></del>	) tobitals (as treb) entil total enter tres err	tri dibit dibit dibit didit dibit iddi
402 J3TH 81. S	sw <sup>i</sup>	P. O. BOX 5337			
RUSKIN FL 33570 SUN CITY FL 33571				DO NOT MIDITE IN TH	LIC CDACE
U\$ 1117	Oxbow Rd	US		DO NOT WRITE IN THE  3. Date incorporated or Qualifed	115 SPACE
win	nauma, FL 33598			03/04/1991	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	Oxbow 3d	26		59-3102751	Not Applicable
21 III T		Suite, Apt. #, etc.	<u>.</u> .		\$8,75 Additional
22	, 5.60	27		5, Certifcate of Status Desired	Fee Required
- City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Win	rauma	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24 BB	598 25 Hillsborand	29 3	0	Personal Property Tax.	☐Yes ☐No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	
81 Name				MEREdith, Grea	Alan
MÈREDITH, GREG ALAN			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
4022 18TH STR SW RUSKIN FL-33570				17 OKDOW Kd	
l nos	KIN FE 33370		83		
}	<b>`</b> .		84 City		L 85 Zip Code 3359\$
1			\		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes f Florida, Such change was aut	s, the above-named co horized by the comora	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	or changing its registered pointment as registered
agent. I a	m familiar with and accept the obligati	ons of Section 607.0505, Florid	la Statutes.	tion's board of directors. I hereby accept the ap	1/11/00
SIGNATURE	V/ ringel	Man Me			7/9/1
	Signature, typed or printed name of registered agent OFFICERS AND		tegistered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12.	D OFFICERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	MEREDITH, GREGORY ALAN	, 🗀 ======	1.2 NAME		_
]	4022 13TH STR SW		1.3 STREET ADDRESS	illy Oxbow Rd	
STREET ADDRESS	RUSKIN FL		1.4 CITY-ST-ZIP	Wimauma, FL 3	3 <b>5</b> 98
CITY-ST-ZIP	D	☐ DELETE	2.1 TiTLE	30 11.00 10.00 1	Tenange ☐ Addition
NAME	MEREDITH, STACEY LYNN		2.2 NAME		-
STREET ADDRESS	AGO AOTH OTO OW		2.3 STREET ADDRESS	1117 Orbow Rd	
1	RUSKIN FL		2.4 CTTY-ST-ZIP	Wingung FC	13598
CITY-ST-ZIP	1100tm41.E	☐ DELETE	3.1 TITLE	TO THE TAX TO A	Change Addition
NAME		_	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	1		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	•	
CITY-ST-ZIP		•	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-\$T-ZIP	}		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	]		6.3 STREET ADDRESS		
CITY OF TIPE 1 1	See that .		6.4 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 aroun an attachment with an address, with all other like empowered.

SIGNATURE: