

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000002442

Entity Name: SHAW IRRIGATION, LLC.

Current Principal Place of Business:

5199 COUNTRY LAKES DRIVE
FT. MYERS, FL 33905

Current Mailing Address:

P.O. BOX 50926
FT. MYERS, FL 33994

FEI Number: 26-0078578

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHAW, CATHERINE D
5199 COUNTRY LAKES DRIVE
EAST FORT MYERS, FL 33905 US

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: CATHERINE SHAW

03/03/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MNGR
Name SHAW, CATHERINE
Address 5199 COUNTRY LAKES DR.
City-State-Zip: FT. MYERS FL 33905

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CATHERINE SHAW

MANAGER

03/03/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date