

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 520493

FILED
Apr 16, 2007
Secretary of State

Entity Name: CRUM PUMP & SUPPLY, INC.

Current Principal Place of Business:

17440 TAVERN RD
BROOKSVILLE, FL 34609

New Principal Place of Business:

17440 TAVERN RD
BROOKSVILLE, FL 34604

Current Mailing Address:

17440 TAVERN RD
BROOKSVILLE, FL 34609

New Mailing Address:

17440 TAVERN RD
BROOKSVILLE, FL 34604

FEI Number: 59-1708179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWE, LOWELL C.
17440 TAVERN RD
BROOKSVILLE, FL 34609 US

Name and Address of New Registered Agent:

LOWE, LOWELL C.
17440 TAVERN RD
BROOKSVILLE, FL 34604 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: LOWELL C LOWE

04/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOWE, LOWELL C.
Address: 17440 TAVERN RD
City-St-Zip: BROOKSVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOWE, LOWELL C
Address: 17440 TAVERN RD
City-St-Zip: BROOKSVILLE, FL 34604

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LOWELL C LOWE

PD

04/16/2007

Electronic Signature of Signing Officer or Director

Date