

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 19 AM 9:39

DOCUMENT # 627183 (7)

1. Corporation Name

MILLER WELL AND PUMP COMPANY, INC.

Principal Place of Business

**6800 S.W. 13TH STREET
GAINESVILLE FL 32608**

Mailing Address

**6800 S.W. 13TH STREET
GAINESVILLE FL 32608**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/22/1979	3a. Date of Last Report 01/19/1994
4. FEI Number 59-1930181	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.047, Florida Statutes. ☒ Yes ☐ No	

2. Principal Place of Business

21
City, Apt. #, etc.

2a. Mailing Address

26
City, Apt. #, etc.

23. City & State

23

28. City & State

28

24. Zip

24

Country

25

29. Zip

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MILLER, CHARLES J.
6800 S.W. 13TH ST.
GAINESVILLE FL 32608**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85.

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature (Type or printed name of Registered Agent and other persons listed)

Signature (Type or printed name of Registered Agent and other persons listed)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

TITLE	PSD
NAME	MILLER, CHARLES J
STREET ADDRESS	6800 SW 13TH ST
CITY, ST, ZIP	GAINESVILLE, FL 00000
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	32608
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 11.010 and 11.011, Florida Statutes. I further certify that the information included 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 manager or business empowered to make this report and required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of report, or on an attachment with an address.

SIGNATURE:

Charles J. Miller
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

1-10-95

904-376-7924