

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90028 033 ***150.00

DOCUMENT # F44080

1. Entity Name
DIVERSIFIED MACHINE AND WELDING, INC.



Principal Place of Business
**900 PRODUCTION DRIVE
SEBRING, FL 33870**

Mailing Address
**Y900 PRODUCTION DRIVE
SEBRING, FL 33870**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01222008

Chg-P

CR2E034 (12/06)

4. FEI Number
59-2120893

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCCLURE, JOHN K
230 SOUTH COMMERCE AVENUE
SEBRING, FL 33870**

Name
Robert S. Swaine
Street Address (P.O. Box Number is Not Acceptable)
425 South Commerce Ave.

City
Sebring **FL** Zip Code
33870

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Robert S. Swaine

Mar. 25, 2008

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
PEPPER, LARRY J
2627 IMPERIAL LANE
SEBRING, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
NEEL, GARY
3912 ANN AVENUE
SEBRING, FL 33870** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
T ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
GALAS, DOREEN
2007 QUEEN AVENUE
SEBRING, FL 33875** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
Pepper, Sarah E.
900 Production Drive
Sebring, FL 33870** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
Pepper, Larry John, Jr.
900 Production Drive
Sebring, FL 33870** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *[Signature]* **Larry J. Pepper**

3-26-08

863-385-8886

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #