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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000003723 (4)

LITTLE GIANT PUMP COMPANY

Principal Place of Business

Mading Address

## **FILED** May 19 1998 8:00am Secretary of State



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3810 N. TULSA AVE. OKLAHOMA CITY OK 73112-2935		3810 N. TULSA AVE. OKLAHOMA CITY OK 73112-2935				DO NOT WRIT	E IN THIS S	SPACE		
						3.	Date Incorporated or Qualified 08/13/1993			
9 Principal P	tace of Business	2a. Mailing Address				4	FEI Number			pplied For
21	Ido of Eddiness	— ·	26			"	73-1100009		<del> </del>	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.			<del></del>	<del> </del>				Additional
22		27				5.	Certificate of Status Desired		Fee R	equired
City & Stat	e	City & State				6.	Election Campaign Financing		\$5.00	May Be
23		28	28			<u> </u>	Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Coun	try			This corporation owes or has p			
24	25				Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent					
	9. Name and Address of Curre	nt Hegistered Agent		B1	Name	10.	Name and Address of New F	egistereu /	Agent	
C T CORPORATION SYSTEM					Name					
1200 PINE ISLAND ROAD PLANTATION FL 33324				B2	Street Addre	ess (P.	O. Box Number is Not Accept	able)		
			[i	B3						
			1	В4	City			FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607 050	02 and 607,1508, Florida State	utos, the ab		named corp	oration	n submits this statement for the		changing i	ts registered
office or r	to the provisions of Sections 607 056 egistered agent, or both, in the State im familiar with, and accept the oblic	e of Florida, Such change was	authorized	by t	the corporati	ion's b	oard of directors. I hereby acc	ept the app	ointment as	registered
	an ignation with and accept the cong	gandria or, occion coriosco, i	ionga otate	100.						ļ
SIGNATURE	Stonature, typed or printed name of registered no	jent and title 4 applicable (NC	OTL: Registered	Agent	t signature require	ed when	reinstating)	DATE		
12.		ND DIRECTORS	13.			Α	ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	DC	DELETE	1.1 TITI	_E					Change	Addition
NAME	HERRICK, TODD W			1.2 NAME						į
STREET ADDRESS	S810 N. TULSA AVE.			1.3 STREET ADDRESS						
CITY-ST-ZIP	OKLAHOMA CITY OK 73112			1.4 CITY - ST - ZIP					[ ] Observe	11122
TITLE	DPCO DELETE			2.1 TITLE					Change	☐ Addition
NAME	ZABLATNIK, GABRIEL J		2.2 NAME							
STREET ADDRESS	3810 N. TULSA AVE. OKLAHOMA CITY OK 73112		2.3 STREET ADDRESS						İ	
CITY-ST-ZIP	DVPT DELETE			2. 4 CITY-ST-ZIP 3.1 TIFLE			<u> </u>	<del></del>	Change	Addition
TITLE	FOSS, JOHN H			4					Change	L ACCURION
NAME	COAO ÀL TURCA AVE			3.2 NAME						1
STREET ADDRESS	AVI AUGMA CITY OV 70110			3 3 STREET ADDRESS						
CITY-ST-ZIP TITLE				3 4. C/TY - ST - Z/P 4.1 T/TLE			<del></del>		Change	Addition
NAME	MCDONALD, DARYL									
STREET ADDRESS	3810 N. TULSA AVE.				ADDRESS					
CITY-ST-ZIP	OKLAHOMA CITY OK 73112		4 4 CIT		Į.					
TITLE		DELETE	5 1 TiT		**				Change	☐ Addition
NAME		-	5 2 NA							
STREET ADDRESS					LODRESS					
CITY-ST-ZIP			5.4 CiT							
TITLE	-	DELETE	6.1 111						Change	Addition
NAME		_	6.2 NAI							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			6.4 CIT		1					
Q UI E.	l		J							

14. I hereby cortify 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 suppliemental 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, or on an attachment with amorphisms.