

# F96000003866

## TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: GIGLIO, RIDDLE & ASSOCIATES, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SHELBY GIGLIO

(Name of Person)

200001907522

-07/30/96--01030--011

\*\*\*\*\*78.75 \*\*\*\*\*78.75

GIGLIO, RIDDLE & ASSOCIATES, INC.

(Firm/Company)

7544 PAKE RD.

(Address)

SARALAND, AL. 36571

(City/State/Zip)

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DIVISION OF CORPORATIONS  
96 JUL 30 AM 9:35

HC 7/31

Should you need to call someone concerning this matter, please call:

SHELBY GIGLIO

(Name of Person)

at ( 334 ) 675-2864

(Area Code & Daytime Telephone Number)

will send CUS from MS  
HC 7/31

### COURIER ADDRESS:

Qualification/Tax Lien Sec.  
Division of Corporations  
409 E. Gaines St  
Tallahassee, FL 32399

### MAILING ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

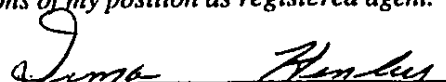
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION  
TO TRANSACT BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE  
STATE OF FLORIDA:**

1. GIGLIO, RIDDLE & ASSOCIATES, INC.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. MISSISSIPPI 3. 640591819  
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. NOV. 10, 1976 5. N/A  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. N/A -PENDING YOUR AUTHORIZATION  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 7544 PAKE RD. SARALAND, AL. 36571  
  
(Current mailing address)
8. SALES MUNICIPAL WATER AND SEWER PRODUCTS  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)  
  
Name: MRS. IRMA HENLEY  
  
Office Address: 300 LIMERICK STREET  
  
PENSACOLA , Florida , 32514  
(Zip Code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and addresses of officers and/or directors: (Street address **ONLY**- P. O. Box **NOT** acceptable)

A. DIRECTORS (Street address only- P. O. Box **NOT** acceptable)

Chairman: ROBERT H. GIGLIO

Address: 7544 PAKE RD.

SARALAND, AL. 36571

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: ROBERT H. GIGLIO

Address: 7544 PAKE RD.

SARALAND, AL. 36571

Director: SHELBY W. GIGLIO

Address: 7544 PAKE RD.

SARALAND, AL. 36571

B. OFFICERS (Street address only- P. O. Box **NOT** acceptable)

President: ROBERT H. GIGLIO

Address: SAME

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: SHELBY W. GIGLIO

Address: SAME

Treasurer: SHELBY W. GIGLIO

Address: SAME

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Shelby W. Giglio*  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. SHELBY W. GIGLIO  
(Typed or printed name and capacity of person signing application)

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# STATE OF MISSISSIPPI

## SECRETARY OF STATE'S OFFICE

ERIC CLARK  
SECRETARY OF STATE  
JACKSON, MISSISSIPPI

### CERTIFICATE OF EXISTENCE/AUTHORITY

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on November 10, 1976 the state of Mississippi issued a Charter/Certificate of Authority to:

GIGLIO, RIDDLE & ASSOCIATES, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is 99 years.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual REPORT HAS BEEN DELIVERED TO THE SECRETARY OF STATE'S OFFICE.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand  
and seal of office  
July 31, 1996

*Eric Clark*

ERIC CLARK  
Secretary of State