2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003186

Entity Name: SELLS PUMP SERVICE, INC.

FILED May 03, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7860 SCHILLINGER PARK RD. MOBILE, AL 36608 **Current Mailing Address: New Mailing Address:** 7860 SCHILLINGER PARK RD. MOBILE, AL 36608 FEI Number: 63-0892611 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **BRYAN MARCUS HART** 395 N. BRETT ST. CRESTVIEW, FL 32539 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ROBINSON, MATHEW Name: Name: 7880 SCHILLINGER PK Address: Address: City-St-Zip: MOBILE, AL 36608 City-St-Zip: Title: VΡ Title: (X) Change () Addition () Delete EDWARDS, JOHN B Name: Name: HAMILTON, MARION B 7880 SCHILLINGER PK Address: 7880 SCHILLINGER PK Address: MOBILE, AL 36608 MOBILE, AL 36608 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MATTHEW ROBINSON CP 05/03/2005