FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 MAY -1 PM 2:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G18761** **(8)**

1. Corporation Name
ASSOCIATED PUMP AND EQUIPMENT CO., INC.

Principal Place of Business	Mailing Address
2326 HOLLYWOOD BLVD HOLLYWOOD FL 33020	2326 HOLLYWOOD BLVD HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/14/1983**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 — County — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 — County — 30

4. FEI Number: **59-2249119** ☐ 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. 199.032 Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

DICKINSON, WALTER C.
2324 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS, IN '95	
TITLE	DP	TITLE	☐ Change ☐ Addition
NAME	ZIBMAN, H M	NAME	
STREET ADDRESS	2326 HOLLYWOOD BLVD	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 00000	CITY-ST-ZIP	
TITLE	DVT	TITLE	☐ Change ☐ Addition
NAME	DICKINSON, WALTER C.	NAME	
STREET ADDRESS	2326 HOLLYWOOD BLVD	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 00000	CITY-ST-ZIP	
TITLE	DVS	TITLE	☐ Change ☐ Addition
NAME	DICKINSON, WALTER	NAME	
STREET ADDRESS	2326 HOLLYWOOD BLVD	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 00000	CITY-ST-ZIP	
TITLE	DV	TITLE	☐ Change ☐ Addition
NAME	MACOMBER, BONNIE L.	NAME	
STREET ADDRESS	2326 HOLLYWOOD BLVD.	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I further certify that the information supplied with this report, voluntarily furnished and 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 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 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 an address.

SIGNATURE: Walter Dickinson -WALTER DICKINSON 5-1-95 305-527-0341
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000007 CP