## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARIMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

H73770 DOCUMENT #

1. Corporation Name

(0)

VENICE PUMPS & MOTORS INC.



Principal Place of Business Mailing Address				[ 19619tt Stift 18884 tutti 1884; sean, ann aran aran aran aran aran	
1335 PINEBROOK WAY VENICE FL 34292		VENICE FL 34292		3. Date Incorporated or Qualified	3a. Date of Last Report
<b>*2,400</b> , 2 0	-			08/30/1985	04/13/1995
		2a. Mailing Address		4. FEI Number	Applied For
<ol> <li>Principal Place</li> </ol>	of Brisuess	26		59-2659652	Not Applicable
Suite, Apt. #, 6	etc	Suite. Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	510.	27			
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
:3		28		This corporation has liability for it	
Zip	Country	Zip	Country	Florida Statutes	□No
24	25]	29	30	10. Name and Address of New R	egistered Agent
	9. Name and Address of Curre	iii negistered Agent	81 Name		
	15.441		20 00 00 00	tress (P.O. Box Number is Not Acceptab	le)
SNYDER,			82 Street Add	iress (1.0. Box Hamiles to Harrist	
306 WAH VENICE F	FIELD AVE. S.		83		
VENIUE I	-L 34282		04 63		85 Zip Code
			84 City		F1
	and accept the obligations of, Sec		des. de de la Registroia Agrod aguat na tristo	oration submits this statement for the purant of directors. I hereby accept the appreciate tendents.	TIATE FICERS AND DIRECTORS IN 12
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO UF	Change Addition
TITLE	PDO	☐ DELETE	. 1 TITLE		
NAME	SNYDER, JEAN		1.2 NAM:		
STREET ADDRESS	306 WARFIELD AVE S		13 STREET ADDRESS		
CITY - ST - ZIP	VENICE FL	DELETE	2 1 TILE		Change Addition
TITLE	O SERVICED IEAN		2 2 NAME		
NAME	SNYDER, JEAN 306 WARFIELD AVE S		2.3 STREET ADDRESS		
STREET ADDRESS	VENICE FL		2 4 C TY - ST - ZIP		
CITY-ST-7IP	VENICE PL	C) DELETE	3 1 fifth		☐ Change ☐ Addition
TITLE			3 2 NAME		
NAME DESCRIPTIONS			30 STREET ADDRESS		
STREET ADDRESS			3.4 CiTY - ST - ZiP		Change Addition
CITY - ST - ZIP TITLE		☐ DELETE	4 1 TITLE		Change C volumen
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CHY - S1 - ZIF		Change Addition
TITLE		DELETE	5 ! THEF		
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		FIRE	54 CITY - ST-7IP		Change Add tion
TITLE		DELETE	6 17/116		<del>-</del>
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIF			6 4 CITY - S1 - ZIF	6, for the exemption stated in Section 1	19.07(3)(k), Florida Statutes. I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(6). 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 cath; that I am an officer or director of this 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. GW -488-4874

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(sayling Photo #