

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

FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J16014 (9)
1. Corporation Name
PAT'S PUMP AND BLOWER, INC.



Principal Place of Business
630 W. CHURCH ST.
ORLANDO FL 32805

Mailing Address
630 W. CHURCH ST.
ORLANDO FL 32805

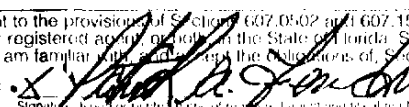
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or Qualified 05/23/1986	
21 630 W. Church ST	26 Suite, Apt. #, etc.	27 City & State	28 Zip	29 Country	30
22 Suite, Apt. #, etc.	27 City & State	28 Zip	29 Country	30	
23 ORLANDO FL	27 City & State	28 Zip	29 Country	30	
24 32805	27 City & State	28 Zip	29 Country	30	

4. FEI Number 59-2686727	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 owes or has paid the current year intangible Personal Property Tax due June 30 ☒ Yes ☐ No	

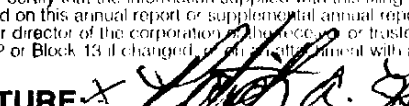
9. Name and Address of Current Registered Agent FENDER, PATRICK A. 630 W. CHURCH ST. 4545 FOX TOWN RD., POLK CITY, FL ORLANDO FL 32805		10. Name and Address of New Registered Agent	
81 Name SAME	82 Street Address (P.O. Box Number is Not Acceptable) SAME	83 10494 STEVEN DR. POLK CITY FL 33868	84 City SAME
85 Zip Code FL	86 Zip Code SAME		

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, as provided 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE:  PATRICK A FENDER PRES/DIR 4-8-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD NAME FENDER, PATRICK A. STREET ADDRESS 10494 STEPHEN DR. CITY-ST-ZIP POLK CITY FL	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE VD NAME FENDER, KEVIN A. STREET ADDRESS 1775 DRUNLINER RD CITY-ST-ZIP ST CLOUD FL	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE SD NAME FENDER, MICHAEL A. STREET ADDRESS 305 GOLDSTONE CITY-ST-ZIP LAKE MARY FL	☒ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE TD NAME LE, MAN STREET ADDRESS 2009 CROSSHAIR CIR CITY-ST-ZIP ORLANDO FL	☒ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I hereby certify 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 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 owner 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 in Block 14 if added with an address.

SIGNATURE:  PATRICK A FENDER PRES/DIR 4-8-98 1-800-359-7867

CR2E034 (10/97)