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May 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K34194 (6)
1. Corporation Name
HYDROTEMP MANUFACTURING COMPANY INCORPORATED

Principal Place of Business
C/O DOUGLAS GRIFFIN
12155 METRO PKWY 5
FT MYERS FL 33912
US

Mailing Address
12155 METRO PKWY #5
FT MYERS FL 33912-1332
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

GRIFFIN, DOUGLAS
12155 METRO PKWY #5
FORT MYERS FL 33912

3. Date Incorporated or Qualified
16/1988

3a. Date of Last Report
05/01/1996

4. Filing Number
6 071124

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

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

P
NAME GRIFFIN, DOUGLAS R.
STREET ADDRESS 15604 FIDDLESTICKS BLVD
CITY-ST-ZIP FORT MYERS FL

TITLE ☐ DELETE

V
NAME MEYERS, RONALD G., SR.
STREET ADDRESS 505 KINZIE CT
CITY-ST-ZIP SANIBEL FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 LE ☐ Change ☐ Addition

1.2 ME

1.3 FEE ADDRESS

1.4 Y-ST-ZIP

2.1 LE

2.2 ME

2.3 FEE ADDRESS

2.4 Y-ST-ZIP

3.1 LE

3.2 ME

3.3 FEE ADDRESS

3.4 Y-ST-ZIP

4.1 LE

4.2 ME

4.3 FEE ADDRESS

4.4 Y-ST-ZIP

5.1 LE

5.2 ME

5.3 FEE ADDRESS

5.4 Y-ST-ZIP

6.1 LE

6.2 ME

6.3 FEE ADDRESS

6.4 Y-ST-ZIP

6.5 LE

6.6 ME

6.7 FEE ADDRESS

6.8 Y-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for 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 file 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

Douglas R. Griffin

4/29/97

941-768-1555

CR2E034 (9/96)