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TAMPA, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tandra B. Matham
Secretary of State
TAMPA, FLORIDA 33604

DOCUMENT # **K79625** (5)
B & M PUMPS AND MOTORS, INC.

Principal Office Address: **1807 S. TAMAMI TRAIL VENICE FL 34293 US**
Mailing Address: **1807 S TAMAMI TRAIL VENICE FL 34293 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/12/1989	3a. Date of Last Report 04/28/1994
4. FEI Number 65-0112307	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. This corporation has liability to Federal tax under 26 USC 1361 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Office Address 21	2a. Mailing Address 26
State, Apt. Bldg. 22	State, Apt. Bldg. 27
City & State 23	City & State 28
Zip 24	Zip 29
30	

9. Name and Address of Current Registered Agent NOLAND, LESLIE G. 311 PAMETO ROAD NOKOMIS FL 34275	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
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11. Pursuant to the provisions of Sections 605.01 and 605.02, Florida Statutes, this also signed corporation submits this statement for the purpose of changing its registered office or registered agent in both of the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am, however, not subject to the provisions of Section 605.03, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADVERTISING CHANGES TO OFFICERS AND DIRECTORS	
1. NAME D NOLAND, LESLIE G.	2. STREET ADDRESS 311 PAMETO ROAD NOKOMIS FL	1. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
2. NAME D NOLAND, LESLIE G.	3. STREET ADDRESS 311 PAMETO ROAD NOKOMIS FL	2. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
3. NAME	4. STREET ADDRESS	3. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
4. NAME	5. STREET ADDRESS	4. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
5. NAME	6. STREET ADDRESS	5. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
6. NAME	7. STREET ADDRESS	6. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
7. NAME	8. STREET ADDRESS	7. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
8. NAME	9. STREET ADDRESS	8. NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in the law. I have read the Florida Statutes, Chapter 605, and I certify that the information included 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 on the certificate. I have provided or caused to be provided to the corporation or the recipient of this report a copy of this report as required by Chapter 605, Florida Statutes, and that my name appears on the filing or filing list of changes in corporate records.

SIGNATURE: *Leslie G. Noland*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR