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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L76095

(3)

JUPITER PUMP AND SUPPLY, INC.

FILED Feb 03 1997 8:00am Secretary of State

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Principal Plac	trincipal Place of Business Mailing Address				1	1 100/1031 841 (0)		1 40101 0 141 1		1811 #1811 #		11 1881				
2581 JUPITER PARK DR., F14 POST OFFICE BOX 8082 JUPITER FL 33458 JUPITER FL 33468-9082																
										Date Incorpor 05/29/1990		ua!ified		te of Las)4/199		ort
2. Principal Place of Business 28. Mailing Address								FEI Number			1	- ,		ed For		
21		FT 11 1 184 Made and a second	26				*****			65-02547	76					pplicable
Suite, Apt #, etc.			27	Suite, Apt. #, etc.				5.	Certificate of t	Status Des	ired		\$8.7 Fee	5 Add Requ		
City & State				City & State				6. 6	Election Camp	paign Finar	ncing		\$5.0	00 Ma	ıv Be	
23	28												ed to F			
Zip		Country		Zip	<u> </u>	ountry	,		8.	This corporati	on has liab	ility for ir	ntangible	tax unde	rs. 19	9.032,
24		25	29		30					Florida Statute				No		
		and Address of Curre	ent Regist	ered Agent					10.	Name and Ad	dress of	New Reg	jistered A	gent		
GIBSON, MORGAN						81	Na	ame								
2 WESTWOOD AVE TEQUESTA FL 33489				82	Str	reet Addre	ess (P.	O. Box Numb	er is Not A	cceptabl	e)					
ILV	TEQUESTA PL 33469				83											
						Ш										
						84	Cit	ty					FL	85 Z	ip Cod	de
11. Pursuant I	to the provis	ions of Sections 607.05	02 and 60	7.1508, Florida Stat	utes the	above	e-nar	med corpo	oration	submits this	statement	for the pu	150000.01	changin	a its re	egistered
office or n	egistered ag	jent, or both, in the Stat th, and accept the obli	e of Florid	a. Such change was	s authori:	zed by	the	corporation	ion's bo	oard of directo	ors. I hereb	у ассер	t the appo	ointment	as reç	istered
	arra arra arra arra arra arra arra arr	int, and decopt the obii	ganons or,	0001011 007.0000, 1	i iorida o	latores	٥.									
SIGNATURE	Signature typed	or printed name of registeren as	gent and title i	applicable. (N	OTE Regist	ered Age	nl s p	nature require	ed when r	einstating)			DATE			
12.		OFFICERS AF	ND DIREC		13					DDITIONS/CH	ANGES TO	OFFICE		DIRECT	ORS II	N 12
TITLE	P			DELETE	1,1	TITLE								Chang		Addition
NAME	TAYLOR,	JEFF			1,3	NAME							,	•	_	
STREET ADDRESS		TH TRIAL NORTH			1,3	STREET	ADDR	RESS	16	69× 91 PITER	oth 7	TRAU	L N			
CITY - ST - ZIP	JUPIER F	L 33478				CITY-S			di	PITER	FL	33	478			
TITLE				DELETE		TITLE			- V -		,		/	Chang	e [Addition
NAME					2.2	NAME										
STHEET ADDRESS					2.3	STREET	ADDR	RESS								
CITY-ST-ZIP					2.	4 CITY-S	ST - 71P	,								
TITLE	· 			DELETE		TITLE								Chang	e	Addition
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TIFLE				DELETE		TITLE								Chang	е	Addition
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TITLE				☐ DELETE		TITLE	<u></u>	 					·	Chang	e T	Addition
NAME						NAME							'		•	
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NAME						NAME							'		- L	ar resident
STREET ADDRESS						STREET	ADOD	ECC								
CITY-S1-ZIP																
	by certify that	the information supplie	ed with the	s filing does not au	aff)y foe∕th	CITY-SI 1e exer	n-zir mpti	on stated	in Sec	tion 119.07(3)	(i). Florida	Statutes	. further	certify th	at the	
					71 2 7	الإمال ت	יוויסוייי	on manual			no pri ri portogal	うについなり	. reculo	וון עווו וסט	ᆅᆒ	

I do 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 injural report in the current 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 of trustee employed 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 a process.

SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

JU-747-477p