

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000012205

**FILED**  
**Dec 03, 2007**  
**Secretary of State**

**Entity Name:** GARY FORD WELL & PUMP COMPANY

**Current Principal Place of Business:**

4601 HOLBROOK RD  
PLANT CITY, FL 33565

**New Principal Place of Business:**

**Current Mailing Address:**

4601 HOLBROOK RD  
PLANT CITY, FL 33565

**New Mailing Address:**

**FEI Number:** 20-0779166

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FORD, GARY W  
4601 HOLBROOK RD  
PLANT CITY, FL 33565 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FORD, GARY W  
Address: 4601 HOLBROOK RD  
City-St-Zip: PLANT CITY, FL 33565

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: FORD, GARY W  
Address: 4601 HOLBROOK RD  
City-St-Zip: PLANT CITY, FL 33565

Title: STD ( ) Change (X) Addition  
Name: FORD, EDNA J  
Address: 4601 HOLBROOK RD  
City-St-Zip: PLANT CITY, FL 33565

Title: VP ( ) Change (X) Addition  
Name: FORD, JOEL T  
Address: 4601 HOLBROOK RD  
City-St-Zip: PLANT CITY, FL 33565

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** GARY W FORD

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PD

12/03/2007

\_\_\_\_\_  
Date