FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 APR 28 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P15248** **(8)**

1. Corporation Name
MUELLER SERVICE CO.

Principal Place of Business	Mailing Address
3 TYCO PARK-TAX DEPT. ANNUALS EXETER NH 03833	3 TYCO PARK-TAX DEPT. ANNUALS EXETER NH 03833

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **07/20/1987**
3a. Date of Last Report: **04/25/1994**

2. Principal Place of Business 21 | 2a. Mailing Address 26
Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27
City & State 23 | City & State 28
Zip 24 | County 25 | Zip 29 | County 30

4. FEI Number: **52-1523726** ☐ 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
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 [illegible] Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	KOZLOWSKI, L. DENNIS	12 NAME		
STREET ADDRESS	~~3 TYCO PARK~~	13 STREET ADDRESS	1 TYCO Park	
CITY-ST-ZIP	EXETER NH	14 CITY-ST-ZIP		
TITLE	AT	21 TITLE		☐ Change ☐ Addition
NAME	RODRIQUES, WILLIAM P	22 NAME		
STREET ADDRESS	500 W ELDORADO ST	23 STREET ADDRESS		
CITY-ST-ZIP	DECATUR IL	24 CITY-ST-ZIP		
TITLE	VP	31 TITLE	Dale Smith	☒ Change ☐ Addition
NAME	~~EGAN, JAMES H~~	32 NAME		
STREET ADDRESS	500 W ELDORADO ST	33 STREET ADDRESS		
CITY-ST-ZIP	DECATUR IL	34 CITY-ST-ZIP		
TITLE	S	41 TITLE		☐ Change ☐ Addition
NAME	DOHERTY, BERNARD J	42 NAME		
STREET ADDRESS	1 TYCO PARK	43 STREET ADDRESS		
CITY-ST-ZIP	EXETER NH	44 CITY-ST-ZIP		
TITLE	D	51 TITLE		☐ Change ☐ Addition
NAME	GUTIN, IRVING	52 NAME		
STREET ADDRESS	1 TYCO PARK	53 STREET ADDRESS		
CITY-ST-ZIP	EXETER NH	54 CITY-ST-ZIP		
TITLE	D	61 TITLE		☒ Change ☐ Addition
NAME	~~HALL, TERRY L~~	62 NAME	Mark H. Swartz	
STREET ADDRESS	1 TYCO PARK	63 STREET ADDRESS		
CITY-ST-ZIP	EXETER NH	64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 receiver 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 on an attachment with an address.

SIGNATURE: Bernard J. Doherty 3/20/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

0483781 FN