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 MAY -1 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000084030 (4)

1. Corporation Name

UNITED HYDRO SALES & SERVICES, INC.

Principal Place of Business
11225 ST. JOHNS INDUSTRIAL PARKWAY
JACKSONVILLE FL 32246
US

Mailing Address
11225 ST. JOHNS INDUSTRIAL PARKWAY
JACKSONVILLE FL 32246
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/08/1993

3a. Date of Last Report: 08/02/1994

4. FEI Number: 59-3217761 ☐ 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

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

9. Name and Address of Current Registered Agent

BRANT MOORE SAPP MACDONALD & WELLS P.A.
50 N. LAURA ST.
SUITE 3100
JACKSONVILLE FL 32202

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 ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	BLACKWELL, MARK L	NAME	
STREET ADDRESS	11225 ST JOHNS INDUSTRIAL PARKWAY	STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32216	CITY-ST-ZIP	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	BOESDORFER, L. CRAIG	NAME	
STREET ADDRESS	11225 ST JOHNS INDUSTRIAL PARKWAY	STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32216	CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(1)(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: Craig Sandy L. Craig Boesdorfer Pres 1-9-95 (904)646-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0024418 CP