2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000002429

1. Entity Name
GRISWOLD PUMP COMPANY

Principal Place of Business	Mailing Address
107 PLANATION OAKS DR. THOMASVILLE, GA 31792 US	107 PLANATION OAKS DR. THOMASVILLE, GA 31792 US

07132007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3361661
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HARRIS, FRED F JR
101 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DALE PAVLOVICH
STREET ADDRESS	12780 SALEM RD.
CITY-ST-ZIP	PAVO, GA 31778
TITLE	V
NAME	SPITZER, DAVE
STREET ADDRESS	416 MARINE ST
CITY-ST-ZIP	CARRABELLE, FL 32322
TITLE	V
NAME	MIKE BOUL
STREET ADDRESS	15437 STONEY OAKS LANE
CITY-ST-ZIP	PRATHER, CA 93651
TITLE	V
NAME	VAUGHN, EDWARD
STREET ADDRESS	105 GOLD CT
CITY-ST-ZIP	THOMASVILLE, GA 31792
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/23/07-80006-020 ·150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dale Pavlovich, President 7/13/2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #