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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000087998 (6)

GUY'S PUMP SERVICE, INC.

FILED Apr 08 1998 8:00am Secretary of State

|--|

Principal Place of Business Mailing Address						i 1851/261 fin Ibile ditti delli Balli balli nole: Ibili delle ibile inili delli		
89 MOSS ROAD AUBURNDALE FL 33823			99 MOSS ROAD AUBURNDALE FL 33823				DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualified	
							10/23/1996	
2. Principal Pl	ace of Business	2a. Mai	ling Address				4, FEI Number Applied For	
21		26					59-3411673 Not Applicable	
Suite, Apt.	#, etc.	Suit	e, Apt. #, etc.			-	S Cortificate of Status Desired S8.75 Additional	
22		27	27				5. Certificate or Status Desired Fee Required	
City & State)	City	City & State				6. Election Campaign Financing \$5.00 May Be	
23		28		· -			Trust Fund Contribution Added to Fees	
Zip	Country	Zip.		-	intry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
24	9. Name and Address of Current	29	4 4	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
		r magisterer	n Wash		81	Name	10. Hallio airo Houseau of Flora Hogistoria Carr	
	NNN, REBECCA M						'	
	MOSS ROAD				82	Street Add	idress (P.O. Box Number is Not Acceptable)	
AUI	BURNDALE FL 33823				83			
					84	City	85 Zip Code	
\					Ш		FL S 2000	
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 Signature, typoid or privated name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstalling) DATE								
12.	Signature, typod or printed name of registered age: OFFICERS AND			13.	u Age	int endustries lade	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	o Directo.	DELETE	1.5 Ti	TLE		Change Addition	
NAME	SPANN, REBECCA M			1.2 N	AME			
STREET ADDRESS	99 MOSS ROAD			1.3 \$	TREET	ADDRESS		
CITY-ST-ZIP	AUBURNDALE FL 33823			1.4 C	ITY - S	T-ZIP		
TITLE	D		DELETE	2.1 1	_		Change Addition	
NAME	FREDERICK, LAURIE			2.2 N	AME		w.,.	
STREET ADDRESS	13209 THOMASVILLE CR., AP	т. С		2.3 S	TREET	ADDRESS	•	
CITY-ST-ZIP	TAMPA FL 33617			2.40	CITY-S	ST-ZIP		
TITLE	D		DELETE	3.1 T	ITLE		Change Addition	
NAMÉ	SZAPPAN, JOSEPH			3.2 N	AME			
STREET ADDRESS	38849 OTIS ALLEN ROAD			3.3 S	TREET	ADDRESS		
CITY-ST-ZIP	ZEPHYRHILLS FL 33541			3 4. 0	OTY-S	ST - ZIP		
TITLE			☐ DELETE	4.1 T	ITLE		Change Addition	
NAME				4.21	NAME			
STREET ADDRESS				4.3 S	TREET	ADDRESS		
City-St-Zip						T-2IP	Chance Addition	
TITLE			☐ DELETE	5.1 T			Change Addition	
NAME				5.2 N				
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP			Drusss			IT-ZIP	Change Addition	
TITLE			☐ DELETE	6.1 1		1	LI CHANGE LI ADDINON	
NAME					IAME			
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP	portify that the information sympled w	ith this filips	dose not qualify:			it-ZIP	Lin Section 119 07(3)(i). Florida Statutes. I further certify that the information	

The pay the true information supplied with this timing does not qualify for the exemption stated in Section 119.07(3)(). 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.

4-2-98