

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000066461

**FILED  
Apr 29, 2004  
Secretary of State**

**Entity Name:** DOVER PUMPS AND WELLS, INC.

**Current Principal Place of Business:**

8103 SANDCRAIN LANE  
PLANT CITY, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

8103 SANDCRAIN LANE  
PLANT CITY, FL 33604

**New Mailing Address:**

**FEI Number:** 59-3561798      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

TRICE, RICHARD A  
8103 SANDCRAIN LANE  
PLANT CITY, FL 33604

**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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DVP ( ) Delete  
Name: TRICE, RICHARD ALLEN  
Address: 8103 SANDCRAIN LANE  
City-St-Zip: PLANT CITY, FL 33604

Title: DP ( ) Delete  
Name: SHERMAN, JOHN A SR  
Address: 8106 SANDCRAIN LANE  
City-St-Zip: PLANT CITY, FL 33604

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD ALLEN TRICE

DVP

04/29/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date