

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 28, 2005 08:00 AM  
Secretary of State

DOCUMENT # P99000038873

1. Entity Name

HOLLAND PUMP COMPANY



Principal Place of Business

7312 WESTPORT PLACE  
WEST PALM BEACH FL 33413-1661

Mailing Address

7312 WESTPORT PLACE  
WEST PALM BEACH FL 33413-1661

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0921051

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLODGETT, WILLIAM W  
7312 WESTPORT PLACE  
WEST PALM BEACH FL 33413-1661

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution: ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME BLODGETT, WILLIAM W  
STREET ADDRESS 7312 WESTPORT PLACE  
CITY-ST-ZIP WEST PALM BEACH FL 33413-1661

TITLE V ☐ Delete  
NAME SWEENEY, PATRICK J  
STREET ADDRESS 14255 TORNELIA LANE  
CITY-ST-ZIP WELLINGTON FL 33414

TITLE V ☐ Delete  
NAME LANT, EUGENE K  
STREET ADDRESS 5283 HOPERITA DR  
CITY-ST-ZIP ORLANDO FL 32812

TITLE AS ☐ Delete  
NAME GOSS, LAURA R  
STREET ADDRESS 10845 ACME RD.  
CITY-ST-ZIP WEST PALM BEACH FL 33414

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME 000000246913  
STREET ADDRESS 02/28/05-80085-013 158.75  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

*Patrick Sweeney V.P.*

1/20/05 561-697-3333