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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(4)

DOCUMENT # \$88382 GERBER PUMPS, INC.

FILED Mar 03 1998 8:00am FLORIDA DEPARTMENT OF STATE Secretary of State

	DO NOT WRITE IN THIS SPACE	
3.	Date Incorporated or Qualified	

Principal Place		Mailing Address		2 1001064 (0) (0) (0) (0) (0) (0) (0) (0) (0) (0)	111 minte minte minte Mibit 1881	
3928 FORSYTI WINTER PARK US		3928 FORSYTH RD. WINTER PARK FL 32792 US	2792		DO NOT WRITE IN THI	S SPACE
		00			3. Date Incorporated or Qualified	-
					10/21/1991	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3096185	Not Applicable
Suite, Apt.	#, otc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Z ip	Country	Zip	Coun	try	8. This corporation owes or has paid the o	
24	25	29	30		Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Curre	nt Registered Agent		Name	10. Name and Address of New Registere	d Agent
	RBER, BERT		'	Name		
	DEW DROP LN SSELBERRY FL 32707		[4	Street Add	ress (P.O. Box Number is Not Acceptable)	
UN	SSELDERNT PL 32/U/		Į.	13	· · · · · · · · · · · · · · · · · · ·	
				34 City		len Zie Oede
				14 City	F	L 85 Zip Code
office or re	to the provisions of Sections 607.056 agistered agent, or both, in the State in familiar with, and accept the oblic	e of Florida. Such change was r	authorized	by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE		,				
	Signature, typed or product name of registered as	ent and blied applicable (NO) ID DIRECTORS		Agont signature requi		ID 0100000011110
12. TITLE	PD	DELETE	13. 1.1 Jul	<u> </u>	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	GERBER, BERT	весен	1.2 NAN			C Glange C Addition
STREET ADORESS	123 DEW DROP LN			EET ADDRESS		
CITY-ST-ZIP	CASSELBERRY FL			'-S1-ZIP		
TITLE		DELETE	2.1 TITL			Change Addition
NAME			2.2 NAN	Œ		·
STREET ADDRESS			2.3 STR	EET ADDRESS		
CITY-ST-ZIP			2. 4 CIT	Y-ST-ZIP		
TITLE		☐ DELETE	3.1 TITL	F		☐ Change ☐ Addition
NAME			3 2 NAM	IE		
STREET ADDRESS			3.3 STR	ET ADORESS		
CITY-ST-ZIP	K. Maraman anakanak sa sasa antak a arras arr	T beleve		Y-ST-ZIP		[] Ohnor [] Adding
TITLE		☐ DELETE	4.1 TITL	1		Change Addition
NAME			4. 2 NAI			
STREET ADDRESS				EET ADDRESS		
CITY+ST-ZIP		DELETE		- ST - ZIP	 	Change Addition
TITLE NAME		L_J Dittill	5.1 TITE 5.2 NAM	i i		L Change Addition
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		DELETE	61 TITL			Change Addition
NAME			62 NAM			
STREET ADDRESS				ET ADDRESS		
CITY ST. 7IP			1	- ST-7/P		

14. Horeby 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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