FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS (4) DOCUMENT # Corporation Name SOUTHERN PUMP AND TANK, INC. Principal Place of Business Mailing Address 300 RIVERSIDE DRIVE 300 RIVERSIDE DRIVE WAUCHULA FL 33873 WAUCHULA FL 33873 3. Date incorporated 01/21/1992 3a. Date of Last Repo 07/18/1995 ated or Qualified Applied For Gove Corre 26 59-3102949 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032. 29 Horida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent lenel CREWS, RICHARD C. 62 300 RIVERSIDE DRIVE WAUCHULA FL 33873 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes organation submits this statement for the purpose of changing its registered offi or registered agent, or both, in the State of Florida, Such change was author familiar with, and accept the obligations of, Section 607.0505, Florida Statut pard of directors. Thereby accept the appointment as registered agent. Lam SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE. THLE Change Addition 1 1 THE TERRELL, JOHN DANE Rta Box 124 NAME 1.2 NAME 300 RIVERSIDE DRIVE STREET ADDRESS 1.3 STREET ADDRESS WAUCHULA FL Bowling Green, Fl 33834 CITY - ST - ZIP 14 CITY - ST- ZIP Crews, Richard V-Pro. DELETE TITLE 2 Till E V-Pres, NAME 2.2 NAME Crews, Richard R+ & B = 124 STREET ADDRESS 2.3 STREET ADDRESS Bowling Green A 33834 C(1Y-S1-Z)F 2.4 CITY - ST - ZIP Addition Change TIME 3 1 TITLE NAME 3.2 NAME Tarrell, Charlotte STREET ADDRESS 3.3 STREET ADDRESS R+ A B N 124 3.4 CITY - ST - ZIP CITY - ST - ZIP Barling Grean, F1 33884 Change DELETE 4.1 Till: F Addit on TITLE NAME 4.2 NAM6 STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Change TITLE 5 1 TITLE ☐ Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 54 CHTY-ST-ZIP DELETE ☐ Change Addition TITLE 6 1 Tills# NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CHTY - ST-ZIP 14. I do hereby certify that the information supplied certify that the information proceed on this annu-oath, that I am an officer or director of the corpo with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further fil report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if grade unde

<u>erer or</u> trusted empowered to execute this report as required by Chapter 607, Florida Statut

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12.

appears in Block 12

SIGNATUÆE:

Block 13 if chan

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR