

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 199106

Entity Name: STENNER PUMP COMPANY, INC.**Current Principal Place of Business:**3174 DESALVO RD.
JACKSONVILLE, FL 32246**Current Mailing Address:**3174 DESALVO RD.
JACKSONVILLE, FL 32246 US**FEI Number:** 59-0791535**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COLD, KATHLEEN H
10151 DEERWOOD PARK BLVD
BLDG 300, SUITE 300
JACKSONVILLE, FL 32256 US*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

Officer/Director Detail :

Title	CHAIRMAN
Name	WARE, TIMOTHY DANIEL
Address	680 PONTE VEDRA BLVD.
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	SEC
Name	WARE, RUTH I
Address	680 PONTE VEDRA BLVD.
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	D
Name	COLD, KATHY
Address	2301 INDEPENDENT SQUARE
City-State-Zip:	JACKSONVILLE FL 32202

Title	CEO
Name	KINCAID, MICHAEL A
Address	824 LOTUS LANE NORTH
City-State-Zip:	JACKSONVILLE FL 32259

Title	VP
Name	HUNTER, JOSEPH L
Address	2543 SE 21ST PL
City-State-Zip:	CAPE CORAL FL 33904

Title	VP
Name	NASTERNAK, DENISE A
Address	404 WANDERING WOODS WAY
City-State-Zip:	PONTE VEDRA FL 32081

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL KINCAID

CEO

02/18/2021

Electronic Signature of Signing Officer/Director Detail

Date