

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000105277

**Entity Name:** GULF STATES APPARATUS SALES, LLC

**Current Principal Place of Business:**

618 BAYOU BLVD  
PENSACOLA, FL 32503

**Current Mailing Address:**

618 BAYOU BLVD  
PENSACOLA, FL 32503 US

**FEI Number:** 45-3245580

**Certificate of Status Desired:** No

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

SHERMAN, CAROL J  
618 BAYOU BLVD  
PENSACOLA, FL 32503 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

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            SHERMAN, CAROL J  
Address        618 BAYOU BLVD  
City-State-Zip: PENSACOLA FL 32503

Title            VP  
Name            LOVELL, JOHN  
Address        137 WINDWOOD CIRCLE  
City-State-Zip: ALABASTER AL 35007

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN E LOVELL

VP

04/12/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date