

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murpham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

MAY 11 AM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # **P23668**

(7)

1. Corporation Name:

PAMECO CORPORATION

Principal Place of Business:

Mailing Address:

TAX DEPT
1000 CENTER PLACE
NORCROSS GA 30093
US

TAX DEPT
1000 CENTER PLACE
NORCROSS GA 30093
US

3. Date Incorporated or Qualified: **03/31/1989**

3a. Date of Last Report: **04/22/1994**

4. FEI Number: **51-0287654**

Applied For:
Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

8. This corporation has liability for estate tax under the 1993 Act: Yes No

2. Principal Place of Business:

2a. Mailing Address:

21

26

State, Apt # etc

State, Apt # etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

B1 Name:

B2 Street Address of Current Registered Agent:

B3

B4 City:

FL

B5 Zip Code:

11. Pursuant to the provisions of Sections 607.0101, 607.0102, and 607.0103, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's Board of Directors. I hereby accept this appointment as registered agent. I am familiar with and accept the obligations of Sections 607.0101-0103, Florida Statutes.

SIGNATURE:

Signature of Current Registered Agent (Type or Print Name)

Signature of New Registered Agent (Type or Print Name)

Date

12. OFFICERS AND DIRECTORS:

(Type or Print Name)

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

12.1	CDP ESHER, BRIAN R 1000 CENTER PL NORCROSS GA
12.2	SD ASKREN, JAMES D, II 1000 CENTER PL NORCROSS GA
12.3	VTD KALLGREN, THEODORE R 1000 CENTER PL NORCROSS GA
12.4	
12.5	
12.6	
12.7	
12.8	
12.9	
12.10	

13.1	Chairman, CEO Esher, Brian R 1000 Center Place NORCROSS, GA 30093	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	CFD (Treasurer, Secretary) Theodore R. Kallgren	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Also a Director
13.3	Asst Treasurer, Asst Secy Mary McCullley 1000 Center Place NORCROSS GA 30093	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Not a Director
13.4	President Charles Scerrentino 1000 Center Place NORCROSS, GA 30093	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Not a Director
13.5		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.7		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.8		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.9		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10		<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.071, Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall cause the same report to be filed and made publicly available to all officers or directors of the corporation or the officer or trustee empowered to make up this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or in an attached form with an address.

SIGNATURE:

Mary M McCullley Mary M McCullley

4/26/95

404 798 0600