

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000069888

**Entity Name:** CYCLONE POWER TECHNOLOGIES, INC.**Current Principal Place of Business:**601 NE 26TH COURT  
POMPANO BEACH, FL 33064**Current Mailing Address:**601 NE 26TH COURT  
POMPANO BEACH, FL 33064**FEI Number:** 26-0519058**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FRUGE, FRANKIE  
601 NE 26TH COURT  
POMPANO BEACH, FL 33064 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	CTO, DIR
Name	SCHOELL, HARRY L
Address	601 NE 26TH COURT
City-State-Zip:	POMPANO BEACH FL 33064

Title	DIR, PRESIDENT
Name	FRUGE, FRANKIE
Address	601 NE 26TH COURT
City-State-Zip:	POMPANO BEACH FL 33064

Title	CFO
Name	SCHAMES, BRUCE
Address	601 NE 26TH COURT
City-State-Zip:	POMPANO BEACH FL 33064

Title	D
Name	DUDZIK, DENNIS
Address	601 NE 26TH COURT
City-State-Zip:	POMPANO BEACH FL 33064

Title	DIRECTOR
Name	HASSON, JAMES
Address	601 NE 26TH COURT
City-State-Zip:	POMPANO BEACH FL 33064

*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: BRUCE SCHAMES****CFO****04/15/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date