

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000003023

Entity Name: SENSENICH COMPOSITE PROPULSION LAB, INC.**Current Principal Place of Business:**2004 WOOD COURT
SUITE B
PLANT CITY, FL 33563**Current Mailing Address:**120 SALLITT DR.
SUITE A
STEVENSVILLE, MD 21666 US**FEI Number:** 35-2661031**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SENSENICH WOOD PROPELLER COMPANY, INC.
2008 WOOD COURT
PLANT CITY, FL 33563 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	DIRECTOR
Name	BUTCHER, MCBEE
Address	120 SALLITT DR. SUITE A
City-State-Zip:	STEVENSVILLE MD 21666

Title	D
Name	BUTCHER, IV, HOWARD
Address	120 SALLITT DR. SUITE A
City-State-Zip:	STEVENSVILLE MD 21666

Title	D
Name	BUTCHER, JONATHAN
Address	120 SALLITT DR. SUITE A
City-State-Zip:	STEVENSVILLE MD 21666

Title	CEO AND TREASURER
Name	HOZIK, JOHN
Address	120 SALLITT DR. SUITE A
City-State-Zip:	STEVENSVILLE MD 21666

Title	PRESIDENT
Name	BOSER, STEVEN
Address	2004 WOOD COURT SUITE B
City-State-Zip:	PLANT CITY FL 33563

Title	SECRETARY AND CONTROLLER
Name	SULLIVAN, DONNA
Address	120 SALLITT DR. SUITE A
City-State-Zip:	STEVENSVILLE MD 21666

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: DONNA SULLIVAN**SECRETARY AND
CONTROLLER****06/09/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date