

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 233487

FILED  
Feb 08, 2010  
Secretary of State

Entity Name: HAINES TESTING LABORATORY, INC.

**Current Principal Place of Business:**

13285-62ND STREET N.  
CLEARWATER, FL 33760 US

**New Principal Place of Business:**

**Current Mailing Address:**

13285-62ND STREET N.  
CLEARWATER, FL 33760 US

**New Mailing Address:**

FEI Number: 59-0918454

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAINES, JUDITH L  
13285-62ND ST N  
CLEARWATER, FL 33760 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PC  
Name: HAINES, JUDITH L  
Address: 13285 62ND ST N  
City-St-Zip: CLEARWATER, FL 33760

Title: VD  
Name: WHEELER, ROBERT L.  
Address: 823A GULF BLVD E.  
City-St-Zip: INDIAN ROCKS BEACH, FL

Title: SD  
Name: NELIS, JENNIFER J  
Address: 4806 CALASANS AVE.  
City-St-Zip: SAINT CLOUD, FL 34771

Title: TD  
Name: NELIS, JENNIFER J  
Address: 4806 CALASANS AVE.  
City-St-Zip: SAINT CLOUD, FL 34771

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: JUDITH L. HAINES

PC

02/08/2010

Electronic Signature of Signing Officer or Director

Date