

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 848762

FILED  
Apr 18, 2011  
Secretary of State

**Entity Name:** PALL AEROPOWER CORPORATION

**Current Principal Place of Business:**

10540 RIDGE RD.  
NEW PORT RICHEY, FL 34654

**New Principal Place of Business:**

**Current Mailing Address:**

10540 RIDGE RD.  
NEW PORT RICHEY, FL 34654

**New Mailing Address:**

**FEI Number:** 59-2068860

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

**OFFICERS AND DIRECTORS:**

**Title:** D/PR  
**Name:** KRASNOFF, ERIC MR.  
**Address:** 25 HARBOR PARK DRIVE  
**City-St-Zip:** PORT WASHINGTON, NY 11050 US

**Title:** D/VP  
**Name:** WESTERN, JAMES MR.  
**Address:** 10540 RIDGE ROAD  
**City-St-Zip:** NEW PORT RICHEY, FL 34654 US

**Title:** VP  
**Name:** LUNDQUIST, JOSEPH MR.  
**Address:** 10540 RIDGE ROAD  
**City-St-Zip:** NEW PORT RICHEY, FL 34654 US

**Title:** VP  
**Name:** SALERNO, ROBERT MR.  
**Address:** 10540 RIDGE ROAD  
**City-St-Zip:** NEW PORT RICHEY, FL 34654 US

**Title:** TREA  
**Name:** MCDERMOTT, LISA MS.  
**Address:** 25 HARBOR PARK DRIVE  
**City-St-Zip:** PORT WASHINGTON, NY 11050 US

**Title:** D  
**Name:** PEREZ, ROBERTO MR.  
**Address:** 25 HARBOR PARK DRIVE  
**City-St-Zip:** PORT WASHINGTON, NY 11050 US

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:** CHERITA THOMAS

ASEC

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date