2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005393

Entity Name: FLUID POWER PRODUCTS, INC.

FILED Jan 06, 2009 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:		
302 TURNI	PIKE ROAD PRO, MA 01772			,pai	
Current Mailing Address:			New Maili	New Mailing Address:	
P.O. BOX 4 SOUTHBO	408 PRO, MA 01772	2			
FEI Number:	04-2349038	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
UNIT A5	OHN P THGATE BLVE A, FL 34234 L				
The above in the State		ubmits this statement for the pur	pose of changing it	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	c Signature of Registered Agent		Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS	S AND DIRECT	ORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () CUNNEEN, BRU 84 EAST PLAIN WAYLAND, MA	STREET	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition CUNNEEN, BRUCE R 58 EAST PLAIN STREET WAYLAND, MA 01778	
Title: Name: Address: City-St-Zip:	V () PECORARO, JO 20 WELCOME F SMITHFIELD, R	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () GREEN, JOHN F 843 TUTLE AVE SARASOTA, FL	. #117	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) PIERCE, MELVI 42 CLIFFSIDE DE PLYMOUTH, MA	PRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STCD () CUNNEEN, JOH 116 PINE HILL F SOUTHBOROUG	ROAD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	D () CUNNEEN, MICI 84 E. PLAIN ST.		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRUCE R CUNNEEN P 01/06/2009