## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F77417

Entity Name: AIR POWER PLUS, INC.

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

6060 S PINE AVE OCALA, FL 34480 US

Current Mailing Address: New Mailing Address:

6060 S PINE AVE OCALA, FL 34480 US

FEI Number: 59-2179695 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WARREN, WILLIAM H, SR
6060 S PINE AVE
OCALA, FL 34480 US
BODINE, TYRONE PRES
6060 S PINE AVE
OCALA, FL 34480 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: TYRONE BODINE 01/04/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T ( ) Delete Title: PRES (X) Change ( ) Addition
Name: PHILLIPS, L L, Name: BODINE, TYRONE PRES
Address: 5145 N F 7TH PLACE Address: 6060 S PINE AVE

 Address:
 5145 N.E. 7TH PLACE
 Address:
 6060 S PINE AVE

 City-St-Zip:
 OCALA, FL
 00000,
 City-St-Zip:
 OCALA, FL 34480

Title: S (X) Delete Title: ( ) Change ( ) Addition

 Name:
 WARREN, SANDRA C.
 Name:

 Address:
 5775 SE 46TH TERRACE
 Address:

 City-St-Zip:
 OCALA, FL
 City-St-Zip:

Title: P (X) Delete Title: ( ) Change ( ) Addition

 Name:
 WARREN, WM H SR,
 Name:

 Address:
 5775 SE 46TH TERRACE
 Address:

 City-St-Zip:
 OCALA, FL
 00000,
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TYRONE BODINE PRES 01/04/2007