

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# J33178

**FILED**  
**Jul 05, 2012**  
**Secretary of State**

**Entity Name:** HALENKAMP PUMP & CONTROL SERVICES, INC.

**Current Principal Place of Business:**

2669 KEY LARGO LANE  
FORT LAUDERDALE, FL 33312 US

**New Principal Place of Business:**

1621 NW 46TH AVENUE  
APT 112  
LAUDERHILL, FL 33313 US

**Current Mailing Address:**

P.O. BOX 9231  
PO BOX 9231  
FT. LAUDERDALE, FL 33312 US

**New Mailing Address:**

P.O. BOX 540772  
MERRITT ISLAND, FL 32954 US

**FEI Number:** 59-2714235

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BASS, DONALD L.  
7386 S.E. CONCORD PLACE  
HOBE SOUND, FL 33455 US

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

HALENKAMP, WILLIAM G  
1610 MERCURY STREET  
MERRITT ISLAND, FL 32953 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: WILLIAM G HALENKAMP

07/05/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HALENKAMP, WILLIAM G.  
Address: 1610 MERCURY STREET  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D  
Name: HALENKAMP MACOMBER, BONNIE L.  
Address: 1610 MERCURY STREET  
City-St-Zip: MERRITT ISLAND, FL 32953

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: BONNIE MACOMBER HALENKAMP

D

07/05/2012

Electronic Signature of Signing Officer or Director

Date