

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J42530

FILED  
Jan 04, 2011  
Secretary of State

**Entity Name:** CUSTOM PUMP & CONTROLS, INC.

**Current Principal Place of Business:**

1840 RIVER OAKS RD  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

**Current Mailing Address:**

1840 RIVER OAKS RD  
JACKSONVILLE, FL 32207 US

**New Mailing Address:**

**FEI Number:** 59-2751562

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FISHER, TOUSEY, LEAS & BALL, P.A.  
818 N. A1A  
SUITE 104  
PONTE VEDRA BEACH, FL 32082 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:** P  
**Name:** STRONG, THOMAS SCOTT  
**Address:** 1840 RIVER OAKS RD  
**City-St-Zip:** JACKSONVILLE, FL 32207

**Title:** VP  
**Name:** STRONG, PETER B  
**Address:** 1840 RIVER OAKS RD  
**City-St-Zip:** JACKSONVILLE, FL 32207

**Title:** VP  
**Name:** STRONG, AGNES M  
**Address:** 1840 RIVER OAKS ROAD  
**City-St-Zip:** JACKSONVILLE, FL 32207

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:** THOMAS SCOTT STRONG

P

01/04/2011

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

\_\_\_\_\_  
Date