

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000056161

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** APPLIED PUMP TECHNOLOGY INC

**Current Principal Place of Business:**

3617 CROWN POINT ROAD  
# 2  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 57487  
JACKSONVILLE, FL 322417487 US

**New Mailing Address:**

**FEI Number:** 59-3722971

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HERNANDEZ, MEREDITH A  
3617 CROWN POINT RD.  
SUITE 2  
JACKSONVILLE, FL 32257 US

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

THE PROF OFFICES OF M A HERNANDEZ LLC  
3617 CROWN POINT RD.  
SUITE 2  
JACKSONVILLE, FL 32257 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: MEREDITH ALLEN HERNANDEZ

04/29/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: DAVIS, HAROLD JR.  
Address: P O BOX 57487  
City-St-Zip: JACKSONVILLE, FL 322417487

Title: VP  
Name: DAVIS, RONDA  
Address: P O BOX 57487  
City-St-Zip: JACKSONVILLE, FL 322417487

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: HAROLD DAVIS JR

PST

04/29/2012

Electronic Signature of Signing Officer or Director

Date