

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000078038

Entity Name: AVP VALVE, INC.

FILED  
Jan 08, 2010  
Secretary of State

**Current Principal Place of Business:**

140 W. BRANNEN RD  
LAKELAND, FL 33813 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 472  
ZEPHYR COVE, NV 89448

**New Mailing Address:**

FEI Number: 58-2645355

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OLIVIER, CHARLES P  
4425 SUGARTREE DRIVE WEST  
LAKELAND, FL 33813 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CFO  
Name: OLIVIER, PLINY L JR  
Address: POST OFFICE BOX 472  
City-St-Zip: ZEPHYR COVE, NV 89448

Title: PRES  
Name: OLIVIER, CHARLES  
Address: 4425 SUGAR TREE DRIVE WEST  
City-St-Zip: LAKELAND, FL 33813

Title: VP  
Name: OLIVIER, TROY P  
Address: 6119 MOUNTAIN LAKE  
City-St-Zip: LAKELAND, FL 33813

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: PLINY L OLIVIER

CFO

01/08/2010

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

\_\_\_\_\_  
Date