

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109828

FILED  
Jan 17, 2011  
Secretary of State

Entity Name: CUTTING EDGE TOOLING, INC.

## Current Principal Place of Business:

1 NORTH DALE MABRY HWY  
SUITE 950  
TAMPA, FL 33609

## New Principal Place of Business:

ONE TAMPA CITY CENTER 201 N. FRANKLIN ST  
SUITE 300  
TAMPA, FL 33602

## Current Mailing Address:

1 NORTH DALE MABRY HWY  
SUITE 950  
TAMPA, FL 33609

## New Mailing Address:

ONE TAMPA CITY CENTER 201 N. FRANKLIN ST  
SUITE 300  
TAMPA, FL 33602

FEI Number: 83-0338818

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CLARK, MATTHEW M  
ONE NORTH DALE MABRY HWY  
#950  
TAMPA, FL 33609 US

## Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY  
ONE TAMPA CITY CENTER 201 N. FRANKLIN ST  
#300  
TAMPA, FL 33602 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: TREVOR HEWLETT

01/17/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: LYNCH, FREDERICK J  
Address: ONE TAMPA CITY CENTER 201 N. FRANKLIN ST  
City-St-Zip: SUITE 300, TAMPA, FL 33602

Title: VP  
Name: REPAR, LAWRENCE  
Address: ONE TAMPA CITY CENTER 201 N. FRANKLIN ST  
City-St-Zip: SUITE 300, TAMPA, FL 33602

Title: AS  
Name: HEWLETT, TREVOR  
Address: ONE TAMPA CITY CENTER 201 N. FRANKLIN ST  
City-St-Zip: SUITE 300, TAMPA, FL 33602

Title: S  
Name: CLARK, MATTHEW M  
Address: ONE TAMPA CITY CENTER 201 N. FRANKLIN ST  
City-St-Zip: SUITE 300, TAMPA, FL 33602

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: TREVOR HEWLETT

AS

01/17/2011

Electronic Signature of Signing Officer or Director

Date