

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109828

FILED  
Apr 16, 2012  
Secretary of State

**Entity Name:** CUTTING EDGE TOOLING, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 83-0338818

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
PLANTATION, FL 33324 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:** 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

04/16/2012

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

\_\_\_\_\_  
Date