

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000162016

FILED  
Apr 16, 2012  
Secretary of State

Entity Name: FORKLIFT SPECIALIST INC.

**Current Principal Place of Business:**

5094 ULMERTON RD  
SUITE 8  
CLEARWATER, FL 337604035

**New Principal Place of Business:**

**Current Mailing Address:**

5094 ULMERTON RD  
SUITE 8  
CLEARWATER, FL 337604035

**New Mailing Address:**

FEI Number: 20-1946720

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BEVINGTON, MICKEY  
5094 ULMERTON RD  
SUITE 8  
CLEARWATER, FL 337604035 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: PD  
Name: BEVINGTON, MICKEY  
Address: 6825 PUFFIN LN  
City-St-Zip: HUDSON, FL 34667

Title: VPD  
Name: BEVINGTON, ROBIN L.  
Address: 6825 PUFFIN LANE  
City-St-Zip: HUDSON, FL 34667

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: ROBIN L. BEVINGTON

VPD

04/16/2012

Electronic Signature of Signing Officer or Director

Date