2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2010
Secretary of State

DOCUMENT# P07000095156

Entity Name: VERTICAL APS, INC.

Current Principal Place of Business:

840 WEST LAKE OTIS DRIVE
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

840 WEST LAKE OTIS DRIVE
WINTER HAVEN, FL 33880

New Mailing Address:

PO BOX 1527
WINTER HAVEN, FL 33882

FEI Number: 42-1743758 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDS, WILLIAM H
840 WEST LAKE OTIS DRIVE
WINTER HAVEN, FL 33880 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: D
Name: MACKAY, GEORGE L
Address: 840 WEST LAKE OTIS DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D
Name: MAURO, KIRK J
Address: 840 WEST LAKE OTIS DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D
Name: MURRELL, FREDERICK J
Address: 840 WEST LAKE OTIS DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D
Name: NEWTON, MATTHEW
Address: 840 WEST LAKE OTIS DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D
Name: SANDS, WILLIAM H
Address: 840 WEST LAKE OTIS DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

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: WILLIAM H. SANDS C 04/29/2010

Electronic Signature of Signing Officer or Director Date