## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000018235

Address:

City-St-Zip:

1526 C STATE AVE

HOLY HILL, FL 32117

Entity Name: HIGH PERFORMANCE FABRICATING, INC.

FILED Apr 26, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place o	New Principal Place of Business:	
1526 C ST HOLY HILI	ATE AVE L, FL 32117				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1526 C STATE AVE HOLY HILL, FL 32117				204 GRAND PRESERVE WAY DAYTONA BEACH, FL 32117 71	
FEI Number	: 26-2005554	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
155 OFFIC	FILING & SEA DE PLAZA DR SSEE, FL 323				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI					
Election Co.		nic Signature of Registered Ago	ent	Date	
		• ,,	ABBITIONS/OUANGE	0 TO OFFICERS AND DIRECTORS	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D ( BAKER, WILL 1526 C STATE HOLY HILL, FI	AVE	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( HATHEWAY, F 1526 C STATE HOLY HILL, FI	AVE	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( TOWSLEY, TH 1526 C STATE HOLY HILL, FI	AVE	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name:	D ( FUCHS, DANII	) Delete EL R	Title: ( Name:	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: WILLIAM F. BAKER D 04/26/2009