2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000039275

Entity Name: POLY INJECTION OF FLORIDA INC

FILED Mar 27, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
1005 1 104 1 1 7 1 1 1 1 1	

4265 NW 44TH AVE SUITE 6 OCALA, FL 34478

Current Mailing Address: New Mailing Address:

4265 NW 44TH AVE SUITE 6 OCALA, FL 34478

FEI Number: 27-2509366 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DUVAL, SEPHEN J 428 WALNUT STREET GREEN COVE SPRINGS, FL 32043 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: SEYLER, EDWARD K Address: 4265 NW 44TH AVE, SUITE 6

City-St-Zip: OCALA, FL 34478

Title: [

Name: TUCK, DAVID

Address: 4265 NW 44TH AVE., SUITE 6

City-St-Zip: OCALA, FL 34478

Title: D

Name: STEPHENSON, SIDNEY R Address: 4265 NW 44TH AVE., SUITE 6

City-St-Zip: OCALA, FL 34478

Title: [

Name: HARDIN, BOBBY

Address: 4265 NW 44TH AVE., SUITE 6

City-St-Zip: OCALA, FL 34478

Title:

Name: HAMPY, DARYL

Address: 4265 NW 44TH AVE., SUITE 6

City-St-Zip: OCALA, FL 34478

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: EDWARD K SEYLER P 03/27/2012