

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000013885

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** INDUSTRIAL BLOWER SERVICES, INC.

**Current Principal Place of Business:**

6162 JAMAICA COURT  
FLEMING ISLAND, FL 32003 US

**New Principal Place of Business:**

**Current Mailing Address:**

6162 JAMAICA COURT  
FLEMING ISLAND, FL 32003 US

**New Mailing Address:**

**FEI Number:** 27-4863939

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUVAL, STEPHEN J CPA  
428 WALNUT ST  
GREEN COVE SPRINGS, FL 32043 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: PSD  
Name: BROWN, ALAN  
Address: 6162 JAMAICA COURT  
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: VPTD  
Name: INDUSTRIAL BLOWER SERVICES LTD  
Address: 6162 JAMAICA COURT  
City-St-Zip: FLEMING ISLAND, FL 32003 US

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: ALAN BROWN

PSD

04/26/2012

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

\_\_\_\_\_  
Date