

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000021775

FILED
Apr 02, 2009
Secretary of State

Entity Name: AMERICAN BATTERY COMPANY

Current Principal Place of Business:

3101 DAVIE BLVD
FORT LAUDERDALE, FL 33312 US

New Principal Place of Business:

Current Mailing Address:

DEKA ROAD
LYON STATION, PA 19536

New Mailing Address:

FEI Number: 23-2801930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARKEY, KENNETH W
3101 DAVIE BLVD
FORT LAUDERDALE, FL 33312 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: PD () Delete
Name: SHARLEY, KENNETH W
Address: 1012 CITRUS ISLE
City-St-Zip: FORT LAUDERDALE, FL

Title: V () Delete
Name: CHRISWISSER, JACK R
Address: 6660 S.W. 20TH STREET
City-St-Zip: PLANTATION, FL

Title: VD () Delete
Name: LANGDON, DAN
Address: DEKA ROAD
City-St-Zip: LYON STATION, PA 19536

Title: SD () Delete
Name: MIKSIEWIEZ, SALLY
Address: DEKA ROAD
City-St-Zip: LYON STATION, PA 19536

Title: TD () Delete
Name: PRUITT, CHRISTOPHER
Address: DEKA ROAD
City-St-Zip: LYON STATION, PA 19536

Title: V () Delete
Name: EBERLY, HAROLD J
Address: DEKA ROAD
City-St-Zip: LYON STATION, PA 19536

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: CHRISTOPHER PRUITT

TD

04/02/2009

Electronic Signature of Signing Officer or Director

Date