

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000001887

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: APPLIED FOUNDATION TESTING, INC.

## Current Principal Place of Business:

4015 J LOUIS STREET  
GREEN COVE SPRINGS, FL 32043

## New Principal Place of Business:

## Current Mailing Address:

4015 J LOUIS STREET  
GREEN COVE SPRINGS, FL 32043

## New Mailing Address:

FEI Number: 59-3417167      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LEPRELL, SAMUEL L  
1930 SAN MARCO BLVD., STE 201  
ST MARK'S PLACE  
JACKSONVILLE, FL 32207 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: DV ( ) Delete  
Name: MUCHARD, MICHAEL K  
Address: 4300 RIDGEMOOR DRIVE N  
City-St-Zip: PALM HARBOR, FL 34685

Title: DP ( ) Delete  
Name: ROBERTSON, DONALD T  
Address: 445 SUMMERSET DRIVE  
City-St-Zip: JACKSONVILLE, FL 32259

Title: DST ( ) Delete  
Name: RUTLAND, MARK A  
Address: 10284 CYPRESS LAKES DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D ( ) Delete  
Name: ELLIOTT, JOHN M  
Address: 208 RIVER PLANTATION DR S.  
City-St-Zip: ST AUGUSTINE, FL 32092

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change ( ) Addition  
Name: MUCHARD, MICHAEL K  
Address: 1052 RIVERSIDE RIDGE ROAD  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: ( ) Change ( ) Addition  
Name:  
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: DONALD ROBERTSON

PRES

04/29/2008

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

\_\_\_\_\_  
Date