

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000061710

FILED
Mar 30, 2009
Secretary of State

Entity Name: ASSOCIATED AIR & PUMP SERVICES, INC.

Current Principal Place of Business:

818 CATTLEMEN RD
SARASOTA, FL 34232

New Principal Place of Business:

1155 CATTLEMEN RD
SARASOTA, FL 34232

Current Mailing Address:

6389 TOWER LANE
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 65-0851059 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DELOACH, ANTHONY
C/O W.E.S., INC.
6389 TOWER LANE
SARASOTA, FL 34240 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: P () Delete
Name: DELOACH, ANTHONY
Address: 1631 JEWEL DR
City-St-Zip: SARASOTA, FL 34240

Title: VP () Delete
Name: DELOACH, LAURIE
Address: 1631 JEWEL DR
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LAURIE DELOACH

VP

03/30/2009

Electronic Signature of Signing Officer or Director

Date