## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000009842

Entity Name: PEL LABORATORIES, INC.

FILED Jul 10, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4420 PENDOLA POINT RD 204 37TH AVE N TAMPA, FL 33619 **UNIT 435** 

ST PETERSBURG, FL 33704

**Current Mailing Address: New Mailing Address:** 

4420 PENDOLA POINT RD 204 37TH AVE N TAMPA, FL 33619

**UNIT 435** 

ST PETERSBURG, FL 33704

FEI Number: 59-3559351 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:

DUNHAM, KEVIN DUNHAM, KEVIN 204 37TH AVE N 4420 PENDOLA POINT RD

TAMPA, FL 33619 UNIT 435 ST PETE, FL 33704 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: KEVIN DUNHAM 07/10/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete CRANDALL, SCOTT CRANDALL, SCOTT Name: Name: 4420 PENDOLA POINT RD Address: 204 37TH AVE N Address: City-St-Zip:

TAMPA, FL 33619 City-St-Zip: ST PETE, FL 33704

( ) Delete Title: Title: (X) Change ( ) Addition DUNHAM, KEVIN Name: DUNHAM, KEVIN Name: 4420 PENDOLA POINT Address: 204 37TH AVE N Address:

TAMPA, FL 33619 ST PETERSBURG, FL 33704 City-St-Zip: 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: SCOTT CRANDALL MR 07/10/2009