

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V48157

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Entity Name:** AQUATIC PLANT TECHNOLOGY, INC.

**Current Principal Place of Business:**

365 GUS HIPP BLVD.  
ROCKLEDGE, FL 32955 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 560165  
ROCKLEDGE, FL 329560165 US

**New Mailing Address:**

**FEI Number:** 59-3134818

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HASELOW, DAVID PRES  
365 GUS HIPP BLVD.  
ROCKLEDGE, FL 32955 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: PSTD  
Name: HASELOW, DAVID  
Address: 365 GUS HIPP BLVD.  
City-St-Zip: ROCKLEDGE, FL 32955

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: DAVID HASELOW

P

03/22/2011

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

\_\_\_\_\_  
Date