## 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 848762** 

**Entity Name: PALL AEROPOWER CORPORATION** 

**Current Principal Place of Business:** 

10540 RIDGE RD.

NEW PORT RICHEY, FL 34654

**Current Mailing Address:** 

10540 RIDGE RD.

NEW PORT RICHEY. FL 34654

FEI Number: 59-2068860 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Electronic Signature of Registered Agent

Date

**FILED** Mar 30, 2015

**Secretary of State** 

CC9258283159

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

KINGSLEY, LAWRENCE D. Name Name COLVIN, CATHLEEN

25 HARBOR PARK DRIVE 25 HARBOR PARK DRIVE Address Address

City-State-Zip: PORT WASHINGTON NY 11050 PORT WASHINGTON NY 11050 City-State-Zip:

Title VP AND CHIEF FINANCIAL OFFICER Title VΡ

Name BARRETT, TODD MR. BROWN, JEFF MR. Name Address 10540 RIDGE ROAD Address 10540 RIDGE ROAD

NEW PORT RICHEY FL 34654 City-State-Zip: City-State-Zip: NEW PORT RICHEY FL 34654

Title **SECRETARY** Title **TREASURER** 

Name MANDELBAUM, ADAM Name GRUBER, JOHN Address 25 HARBOR PARK DRIVE 25 HARBOR PARK DRIVE Address

City-State-Zip: PORT WASHINGTON NY 11050 PORT WASHINGTON NY 11050 City-State-Zip:

Title DIRECTOR, PRESIDENT AND CHAIRMAN OF THE BOARD

Name MORRIS, MARK 10540 RIDGE ROAD Address

City-State-Zip: NEW PORT RICHEY FL 34654

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.

03/30/2015 SIGNATURE: CATHLEEN COLVIN DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date