

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 857727

**Entity Name:** AIR POWER, INC.

**Current Principal Place of Business:**

1430 TRINITY AVENUE (272608360)  
HIGH POINT, NC 27262

**Current Mailing Address:**

1430 TRINITY AVENUE (272608360)  
P.O.BOX 5406  
HIGH POINT, NC 27262

**FEI Number:** 56-0898308

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**Officer/Director Detail :**

Title           CHAIRMAN  
Name           BALL, WILLIAM A.  
Address        212 JONES CIRCLE  
City-State-Zip: THOMASVILLE NC 27360

Title           STD  
Name           BALL, ALICE F.  
Address        212 JONES CIRCLE  
City-State-Zip: THOMASVILLE NC 27360

Title           PRESIDENT  
Name           BALL, WILLIAM AJR  
Address        2801 FINCH FARM ROAD  
City-State-Zip: TRINITY NC 27370

Title           CFO  
Name           MOUZON, SAMUEL A  
Address        168 OLD FARM RD.  
City-State-Zip: THOMASVILLE NC 27262

*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:** SAMUEL ALLEN MOUZON

CFO

03/04/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date