Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90119 043 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

P.O. BOX 958402

755 RINEHART ROAD

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 579031

1. Corporation Name

Principal Place of Business

755 RINEHART ROAD

P.O. BOX 958402

INSURADYNE CORP.

LAKE MARY FL	32795-5402	LAKE MARY FL 32795-5402	LAKE MARY FL 32795-5402		DO NOT WRITE IN THIS SPACE		
ENG WALL IS SELVE OF COMME				3. Date Incorporated or Qualifed			
					07/13/1978		
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	$\Box\Box$	Applied For
21	400 U. 20-1111-1	26			63-0761784		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			_ \$8.75 Additional		
		27			5. Certifcate of Status Desired		Required
City & State	<u> </u>		City & State		6. Election Campaign Financing	<u>* ¢5 n</u>	0 May Be
23		28			Trust Fund Contribution		d to Fees
Zip Country Zip			Country				
一 ・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・			30		 This corporation owes the current year Inta Personal Property Tax. 	Yes	□No
24	9. Name and Address of Current		301		10. Name and Address of New Registered A		
	5. Name and Address of Current	Negistered Agent	81	Name	is. Name and reduces of New Hogistorea.	50	
				1401110			
THOMPSON, DAVID C 755 RINEHART RD			82	Street A	ddress (P.O. Box Number is Not Acceptable)		
LAN	MARY FL 32746		83				
			84	City		85 Z	p Code
			-	0,	FL		,
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above	e-named co	orporation submits this statement for the purpose of o	hanging	its registered
office or n	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was au	thorized by da Statutes	the corpor	ation's board of directors. I hereby accept the appoin	ıment as	registerea
_	m lamiliai with, and accept the obligation	inis di, decalori dor .dodo, r lorr		•			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: I	Registered Ager	t signature req	uired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIREC	TORS IN 12
TITLE	PD /	X DELETE	1.1 TITLE	P	P	Chang	ge Addition
NAME	PIHAKIS, GEORGE	**	1.2 NAME	•	QUIST, GEORGE R.		
STREET ADDRESS	755 RINEHART RD		1.3 STREE	ADDRESS	4491 WANDER LANE		
	LAKE MARY FL		1.4 CITY-S		SALT LAKE CITY, UT 841	17	
CITY-ST-ZIP	VID VID	DELETE	2.1 TITLE			Chang	e Addition
TITLE	• • •	N DELLE	1	77	· -	,	, –
NAME	THOMPSON, DAVID C		2.2 NAME		SARGENT, WILLIAM C.		
STREET ADDRESS	755 RINEHART RD		2.3 STREE		4974 HOLLADAY BLVD	17	ł
CITY-ST-ZIP	LAKE MARY FL		2.4 C/TY-S		SALT LAKE CITY, UT 841		- Partition
TITLE	D	DELETE	3.1 TITLE	T	T	Chang	ge 🛅 Addition
NAME	RITCHEY, FERRIS S, JR.	٠.	3.2 NAME		QUIST, SCOTT M.		
STREET ADDRESS	1910 28TH AVE., SOUTH		3.3 STREET	ADORESS	7 WANDERWOOD WAY		
CITY-ST-ZIP	BIRMINGHAM AL		3.4. CITY- S	T-ZIP	SANDY, UT 84092		
TITLE	D	DELETE	4.1 TITLE	D	D	Chang	ge
NAME	MULLENIX, CHARLES, DR	•	4. 2 NAME		CRITTENDEN, CHARLES L.		
STREET ADDRESS	702 WAUKEGAN RD.	~	4.3 STREE	ADDRESS	2334 FILMORE AVENUE		
CITY-ST-ZIP	GLENVIEW IL		4.4 CITY-S	r-zip	OGDEN, UT 84401		i
TITLE		☐ DELETE	_	D		Chang	ge Addition
NAME			5.2 NAME		MOODY, HOWARD C.		ł
STREET ADDRESS			5.3 STREE	ADDRESS	1782 E. FAUNSDALE DR.		{
			5.4 CITY-S		SANDY, UT 84092		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		D	Change Ch	e Addition
TITLE			6.2 NAME		-	* 22	,
NAME			A.E. (M. OHIC		LOWE, SHERMAN B.		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or ordan attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2197 S. 21ST E.