

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 579031

FILED
Apr 30, 2008
Secretary of State

Entity Name: INSURADYNE CORP.

Current Principal Place of Business:

755 RINEHART ROAD
P.O. BOX 958402
LAKE MARY, FL 327955402

New Principal Place of Business:

755 RINEHART ROAD
LAKE MARY, FL 32796

Current Mailing Address:

755 RINEHART ROAD
P.O. BOX 958402
LAKE MARY, FL 327955402

New Mailing Address:

FEI Number: 63-0761784 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILL, STEPHEN M
755 RINEHART RD
LAKE MARY, FL 32746 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: QUIST, GEORGE R
Address: 4491 WANDER LANE
City-St-Zip: SALT LAKE CITY, UT 84117

Title: TV () Delete
Name: SILL, STEPHEN M
Address: 5300 S. 360 W. - SUITE 200
City-St-Zip: SALT LAKE CITY, UT 84123

Title: PD () Delete
Name: QUIST, SCOTT M
Address: 7 WANDERWOOD WAY
City-St-Zip: SANDY, UT 84092

Title: D () Delete
Name: CRITTENDEN, CHARLES
Address: 2334 FILMORE AVE
City-St-Zip: OGDEN, UT 84401

Title: D () Delete
Name: MOODY, HOWARD C
Address: 1782 E FAUNSDALE DR
City-St-Zip: SANDY, UT 84092

Title: VSD () Delete
Name: QUIST, G. ROBERT
Address: 5300 S. 360 W. - SUITE 200
City-St-Zip: SALT LAKE CITY, UT 84123

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DIANA C. OLSON

VP

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date