

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 261255

1. Corporation Name  
AIRAD SYSTEMS, INC.

Principal Place of Business

119 W INTENDENCIA ST  
P.O. BOX 12158  
PENSACOLA FL 32501  
US

Mailing Address

119 W INTENDENCIA ST  
P.O. BOX 12158  
PENSACOLA FL 32501  
US

FILED  
Mar 02, 1999 8:00 am  
Secretary of State

03-02-1999 90076 018 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/26/1962

4. FEI Number

59-0977621

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 314 North Spring Street

Suite, Apt. #, etc.

2a. Mailing Address

26 314 North Spring Street

Suite, Apt. #, etc.

City & State

23 Pensacola, FL

City & State

28 Pensacola, FL

Zip Country

24 32501 25 USA

Zip Country

29 32501 30 USA

9. Name and Address of Current Registered Agent

GREENFIELD, JOHN  
119 W INTENDENCIA ST  
PENSACOLA 32501

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

|                |                      |  |
|----------------|----------------------|--|
| TITLE          | P                    | <input checked="" type="checkbox"/> DELETE |
| NAME           | GREENFIELD, JOHN     |  |
| STREET ADDRESS | 119 E INTENDENCIA ST |  |
| CITY-ST-ZIP    | PENSACOLA FL         |  |
| TITLE          | V                    | <input checked="" type="checkbox"/> DELETE |
| NAME           | EMLING, CHUCK        |  |
| STREET ADDRESS | 119 W INTENDENCIA ST |  |
| CITY-ST-ZIP    | PENSACOLA FL         |  |
| TITLE          | T                    | <input checked="" type="checkbox"/> DELETE |
| NAME           | NEW, NED             |  |
| STREET ADDRESS | 119 W INERNDENCIA ST |  |
| CITY-ST-ZIP    | PENSACOLA FL         |  |
| TITLE          | S                    | <input checked="" type="checkbox"/> DELETE |
| NAME           | JESMONTH, RICHARD    |  |
| STREET ADDRESS | 119 W INTENDENCIA ST |  |
| CITY-ST-ZIP    | PENSACOLA FL         |  |
| TITLE          |                      | <input type="checkbox"/> DELETE            |
| NAME           |                      |  |
| STREET ADDRESS |                      |  |
| CITY-ST-ZIP    |                      |  |
| TITLE          |                      | <input type="checkbox"/> DELETE            |
| NAME           |                      |  |
| STREET ADDRESS |                      |  |
| CITY-ST-ZIP    |                      |  |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                         |  |
|--------------------|-------------------------|--|
| 1.1 TITLE          | CEO                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME           | Greenfield, John        |  |
| 1.3 STREET ADDRESS | 314 North Spring Street |  |
| 1.4 CITY-ST-ZIP    | Pensacola, FL 32501     |  |
| 2.1 TITLE          | President               | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME           | Daniel, Thomas          |  |
| 2.3 STREET ADDRESS | 314 North Spring Street |  |
| 2.4 CITY-ST-ZIP    | Pensacola, FL 32501     |  |
| 3.1 TITLE          | Vice President          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME           | Jesmonth, Richard E.    |  |
| 3.3 STREET ADDRESS | 314 North Spring Street |  |
| 3.4 CITY-ST-ZIP    | Pensacola, FL 32501     |  |
| 4.1 TITLE          | Vice President          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME           | Emling III, Charles     |  |
| 4.3 STREET ADDRESS | 314 North Spring Street |  |
| 4.4 CITY-ST-ZIP    | Pensacola, FL 32501     |  |
| 5.1 TITLE          | Secretary/Treasurer     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME           | New Jr., A. E.          |  |
| 5.3 STREET ADDRESS | 314 North Spring Street |  |
| 5.4 CITY-ST-ZIP    | Pensacola, FL 32501     |  |
| 6.1 TITLE          |                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 6.2 NAME           |                         |  |
| 6.3 STREET ADDRESS |                         |  |
| 6.4 CITY-ST-ZIP    |                         |  |

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

John Greenfield 1/21/99 850-433-9953

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)