

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 827021

FILED  
Feb 02, 2007  
Secretary of State

Entity Name: CYBERNETICS & SYSTEMS, INC.

## Current Principal Place of Business:

301 W BAY STREET  
JACKSONVILLE, FL 32202 US

## New Principal Place of Business:

## Current Mailing Address:

500 WATER ST  
S/C C160  
JACKSONVILLE, FL 32202 US

## New Mailing Address:

FEI Number: 61-0678576      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MELTON, DONNA W  
500 WATER STREET  
JACKSONVILLE, FL 32202 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: DP ( ) Delete  
Name: WEST, JOHN L  
Address: 500 WATER STREET  
City-St-Zip: JACKSONVILLE, FL 32202

Title: DS ( ) Delete  
Name: GOLDMAN, NATHAN D  
Address: 500 WATER STREET  
City-St-Zip: JACKSONVILLE, FL 32202

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change ( ) Addition  
Name: MILLS, PETER K  
Address: 500 WATER STREET  
City-St-Zip: JACKSONVILLE, FL 32202

Title: DT ( ) Change (X) Addition  
Name: ELIASSON, FREDRIK J  
Address: 500 WATER STREET  
City-St-Zip: JACKSONVILLE, FL 32202

Title: CS ( ) Change (X) Addition  
Name: MELTON, DONNA W  
Address: 500 WATER STREET  
City-St-Zip: JACKSONVILLE, FL 32202

I hereby certify that the information supplied with this filing does not qualify for the 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: LINDA PHILCOX

SPEC

02/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date