

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 846976

FILED
Jan 14, 2009
Secretary of State

Entity Name: DYNATEST CONSULTING, INC.

Current Principal Place of Business:

165 S CHESTNUT
VENTURA, CA 93001

New Principal Place of Business:

Current Mailing Address:

165 S CHESTNUT
VENTURA, CA 93001

New Mailing Address:

FEI Number: 95-3323707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BECK, WILLIAM II
8485 LILLY LAKE RD.
MELROSE, FL 32666 US

Name and Address of New Registered Agent:

BECK, II, WILLIAM A
8485 LILLY LAKE RD.
MELROSE, FL 32666 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: WILLIAM A. BECK II

01/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARRIS, THOMAS B
Address: 5350 WOODBURY
City-St-Zip: VENTURA, CA 93001 US

Title: VP () Delete
Name: BECK, WILLIAM II
Address: 8485 LILLY LAKE RD.
City-St-Zip: MELROSE, FL 32666 US

Title: S () Delete
Name: JOHNS, MARGARET S
Address: 207 S. LAKEWOOD
City-St-Zip: STARKE, FL 32091 US

Title: T () Delete
Name: DAY, ARTHUR L
Address: 4450 IROQUOIS AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: VP () Delete
Name: COETZEE, NICHOLAAS F P.E.
Address: 4292 CASITAS PASS ROAD
City-St-Zip: VENTURA, CA 93001 US

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: VP (X) Change () Addition
Name: BRIGGS, ROBERT C
Address: 499 GOLDEN POND CT
City-St-Zip: JACKSONVILLE, FL 32259 US

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: MARGARET S. JOHNS

S

01/14/2009

Electronic Signature of Signing Officer or Director

Date