FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **855597** **(1)**

1. Corporation Name

DYNETICS, INC.

Principal Place of Business	Mailing Address
1000 EXPLORER BLVD. POST OFFICE DRAWER B HUNTSVILLE AL 35806	1000 EXPLORER BLVD. POST OFFICE DRAWER B HUNTSVILLE AL 35806

3. Date Incorporated or Qualified: **02/21/1983**
3a. Date of Last Report: **01/23/1995**

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) Country (30)

4. FEI Number: **63-0670881** ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 of Typed or Printed Name of Person Executing Form) (New Registered Agent Signature required when executing) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BENDICKSON, MARCUS J.		1.2 NAME		
STREET ADDRESS	1307 HUNTSVILLE HILLS		1.3 STREET ADDRESS		
CITY-ST-ZIP	HUNTSVILLE AL		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	2.1 TITLE	V	☐ Change ☒ Addition
NAME	BAUMBACH, THOMAS A		2.2 NAME	BARNARD, HERBERT M.	
STREET ADDRESS	9403 HARTWICK CIRCLE		2.3 STREET ADDRESS	26 ST JAMES SQUARE	
CITY-ST-ZIP	HUNTSVILLE AL		2.4 CITY-ST-ZIP	HUNTSVILLE AL	
TITLE	V	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	HAYS, ROY D.		3.2 NAME		
STREET ADDRESS	P.O. BOX 925		3.3 STREET ADDRESS		
CITY-ST-ZIP	FREEPORT FL		3.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	WILSON, BOB O..		4.2 NAME		
STREET ADDRESS	1502 OLIVER ST		4.3 STREET ADDRESS		
CITY-ST-ZIP	ALBERTVILLE AL		4.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	KELLY, E. P.		5.2 NAME		
STREET ADDRESS	10317 PICADILLY LANE		5.3 STREET ADDRESS		
CITY-ST-ZIP	HUNTSVILLE AL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Eugene P. Kelly
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23-96 (Date) 205-922-9290 (Daytime Phone #)

EUGENE P. KELLY - TREASURER