## **2000 UNIFORM BUSINESS REPORT (UBR)**

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

SIGNATURE:

## **FILED** DOCUMENT # 855597 Jan 27, 2000 8:00 am 1. Entity Name **Secretary of State** DYNETICS, INC. 01-27-2000 90073 007 \*\*\*158.75 Principal Place of Business Mailing Address 1000 EXPLORER BLVD. PO BOX 5500 HUNTSVILLE AL 35814-5500 HUNTSVILLE AL 35806 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 63-0670881 Not Applicable Zip Country Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CEO ☐ Addition TITLE Change TITLE ☐ Delete BENDICKSON, MARCUS J. NAME NAME STREET ADDRESS 11009 STONE MOUNTAIN DRIVE STREET ADDRESS CITY-ST-ZIP **HUNTSVILLE AL 25803** CITY-ST-ZIP 35803 ☐ Addition Delete TITLE BREGI dent Change TITLE BAUMBACH, THOMAS A NAME NAME 133 INWOOD TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MADISON AL 35758 CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE BARNARD, HERBERT M. NAME NAME STREET ADDRESS 26 ST JAMES SQUARE STREET ADDRESS F5801 CITY-ST-ZIP HUNTSVILLE AL CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change KELLY, E. P. NAME NAME STREET ADDRESS 700 MIRAVISTA DR STREET ADDRESS **HUNTSVILLE AL** CITY-ST-ZIP CITY-ST-ZIP Controller Controller Change **Addition** TITLE TITLE ☐ Delete Reynolds, Randy Co Regnolds, Randy Ci 14011 RANDAMERE DR. NAME NAME 14011 RANDAMERO DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Hundsville HUATSYIlle, AL Change □ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if