## 2005 FOR PROFIT CORPORATION

## Jan 20, 2005 8:00 am **ANNUAL REPORT Secretary of State DOCUMENT #855597** 01-20-2005 90042 039 \*\*\*158.75 1. Entity Name DYNETICS, INC. Principal Place of Business Mailing Address 20004214 1000 EXPLORER BLVD. PO BOX 5500 HUNTSVILLE, AL 35806 HUNTSVILLE, AL 35814 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 01142005 Applied For City & State 4 EEI Number City & State Not Applicable 63-0670881 Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. ☐ Addition TITLE ☐ Delete TITLE ☐ Change BENDICKSON, MARCUS J. NAME NAME STREET ADDRESS 11009 STONE MOUNTAIN DRIVE STREET ADDRESS CITY-ST-ZIP HUNTSVILLE, AL 35803 CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition TITLE BAUMBACH, THOMAS A NAME NAME 133 INWOOD TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MADISON, AL 35758 CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition BARNARD, HERBERT M. NAME NAME STREET ADDRESS 26 ST JAMES SQUARE STREET ADDRESS CITY - ST- ZIP HUNTSVILLE, AL 35801 CITY-ST-7IP ☐ Change ☐ Addition Delete TITLE TITLE REYNOLDS, RANDY C NAME NAME STREET ADDRESS 14011 RANDEMERE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HUNTSVILLE, AL 35803 Change . ☐ Addition TITLE ☐ Delete TITLE KURTŽ, EVELYN NAME NAME 32/2 Carlest Delice STREET ADDRESS 3212 BAYSHORE DR. STREET ADDRESS CITY-ST-ZIP HUNTSVILLE, AL 35810 CITY-ST-ZIP TITLE -☐ Delete TITLE NAME ~ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

FILED