


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 08, 2005 8:00 am
Secretary of State


09-08-2005 90066 022 ***550.00

DOCUMENT # F02000005510		
1. Entity Name AVIDYNE CORPORATION		

Principal Place of Business 420 N WICKHAM ROAD MELBOURNE, FL 32935	Mailing Address 55 OLD BEDFORD RD. LINCOLN, MA 01773
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

30063473



08182005 Chg-P CR2E034 (10/03)

4. FEI Number 04-3213876	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent SCHWIN, DANIEL J 228 WEST DILDO DR. MIAMI BEACH, FL 33139	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CP SCHWINN, DANIEL J 55 OLD BEDFORD RD. LINCOLN, MA 01773 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CPD Schwinn, Daniel J. 55 Old Bedford Rd., Lincoln, MA 01773 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MORGAN, MICHAEL 55 OLD BEDFORD RD. LINCOLN, MA 01773 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	V Lyford, Jon 55 Old Bedford Rd., Lincoln, MA 01773 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST MACPHEE, JOHN 55 OLD BEDFORD RD. LINCOLN, MA 01773 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MAHAFFEY, LLOYD 100 FIRST AVE. SUITE 950 PITTSBURGH, PA 15222 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Maeder, Paul 55 Old Bedford Rd., Lincoln, MA 01773 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HANSMAN, R. JOHN MASSACHUSETTS INSTITUTE OF TECHNOLOGY CAMBRIDGE, MA 021394307 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D YANKOWSKI, CARL 125 FARM STREET DOVER, MA 02030 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **8/30/2005** **781-402-7424**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

MORSE,
BARNES-BROWN &
PENDLETON, P.C.

The Business Law Firm on Route 128

Reservoir Place • 1601 Trapelo Road • Waltham, MA 02451 • (781) 622-5930 • Fax (781) 622-5933 • email: mbbp@mbbp.com

50065479
#F02000005510

Writer's email:
cbc@mbbp.com

September 2, 2005

US MAIL, EXPRESS

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

RE: Annual Report filing

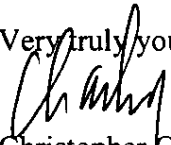
Ladies and Gentlemen:

Enclosed herewith for filing please find one delinquent '05 annual report for Avidyne Corporation, along with a filing fee check of \$550.

Kindly acknowledge receipt of the foregoing by stamping the enclosed copy of this filing and returning it to me in the envelope provided.

Do not hesitate to contact me if you have any questions.

Very truly yours,


Christopher Carmody
Corporate Paralegal

Enclosure