## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F02000005510

**Entity Name: AVIDYNE CORPORATION** 

FILED May 15, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 420 N WICKHAM ROAD MELBOURNE, FL 32935 **Current Mailing Address: New Mailing Address:** 55 OLD BEDFORD RD. LINCOLN, MA 01773 FEI Number: 04-3213876 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHWIN, DANIEL J SCHWIN, DANIEL J 228 WEST DILIDO DR. 420 N. WICKHAM ROAD US MIAMI BEACH, FL 33139 US MELBOURNE, FL 32935 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: DANIEL J. SCHWINN 05/15/2007 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition SCHWINN, DANIEL J Name: Name: SCHWINN, DANIEL J 55 OLD BEDFORD RD. C/O AVIDYNE, 55 OLD BEDFORD RD. Address: Address: City-St-Zip: LINCOLN, MA 01773 City-St-Zip: LINCOLN, MA 01773 Title: Title: () Delete (X) Change ( ) Addition LYFORD, JON Name: Name: LYFORD, JON 55 OLD BEDFORD RD. C/O AVIDYNE, 55 OLD BEDFORD RD. Address: Address: LINCOLN, MA 01773 LINCOLN, MA 01773 City-St-Zip: City-St-Zip: Title: (X) Change ( ) Addition Title: ( ) Delete MACPHEE, JOHN KRAUSS, PAUL E Name: Name: 55 OLD BEDFORD RD C/O AVIDYNE, 55 OLD BEDFORD RD. Address: Address: City-St-Zip: LINCOLN, MA 01773 City-St-Zip: LINCOLN, MA 01773 Title: () Delete Title: (X) Change ( ) Addition MAEDER, PAUL MAEDER, PAUL Name: Name: Address: 55 OLD BEDFORD RD Address: C/O AVIDYNE, 55 OLD BEDFORD RD City-St-Zip: City-St-Zip: LINCOLN, MA 01773 LINCOLN, MA 01773 Title: Title: () Delete () Change () Addition HANSMAN, R. JOHN Name: Name: MASSACHUSETTS INSTITUTE OF TECHNOLOGY Address: Address: City-St-Zip: CAMBRIDGE, MA 021394307 City-St-Zip: Title: () Delete Title: () Change () Addition YANKOWSKI, CARL Name: Name: 125 FARM STREET Address: Address: City-St-Zip: City-St-Zip: **DOVER. MA 02030** 

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: PAUL ERIC KRAUSS ST 05/15/2007