

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90165 022 ***150.00

DOCUMENT # F93000005738

1. Entity Name
DYCON CORPORATION OF MARYLAND



Principal Place of Business
**512 D COMMERCE DRIVE
PANAMA CITY FL 32408
US**

Mailing Address
**P.O. BOX 28265
PANAMA CITY FL 32411-8265
US**

11003340



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **52-0914604**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BAUMMER, GEORGE
512-D COMMERCE DR.
PANAMA CITY BEACH FL 32408**

Name **Strohm, Thomas A.**

Street Address (P.O. Box Number is Not Acceptable)
512-D Commerce Dr

City **Panama City Beach**

FL

Zip Code
32408

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 *Thomas A. Strohm*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-21-03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DCP** ☒ Delete
NAME **BAUMMER, GEORGE P**
STREET ADDRESS **5833 N. LAGOON DR.**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32408**

TITLE **DT** ☐ Delete
NAME **NELSON, THOMAS L**
STREET ADDRESS **40 GLENBROOK DR.**
CITY-ST-ZIP **PHOENIX MD 21131**

TITLE **VSD - CPD** ☐ Delete
NAME **STROHM, THOMAS A**
STREET ADDRESS **PO BOX 27997 - 626 AMBERJACK DR.**
CITY-ST-ZIP **PANAMA CITY FL 32411-7997**

TITLE **VSD** ☐ Delete
NAME **Kekich, David A.**
STREET ADDRESS **1533 Via Leon**
CITY-ST-ZIP **Palos Verdes Estates, CA 90274**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Thomas A. Strohm

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-03

Date

850-235-1283

Daytime Phone #

CR2E034 (10/02)