

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1996**

 FLORIDA DEPARTMENT OF STATE  
 Sandra B. Murtham  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # J52899 (8)**  
 1. Corporation Name

**AERTECH, INC.**

Principal Place of Business

Mailing Address

**% DAVID W. WILCOX  
P.O. BOX 14072  
BRADENTON FL 34280**
**% DAVID W. WILCOX  
P.O. BOX 14072  
BRADENTON FL 34280**


2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

01/15/1987

05/01/1995

4. FEI Number

Applied For

Not Applicable

59-2760948

5. Certificate of Status Desired

☐
**\$8.75 Additional  
Fee Required**
6. Election Campaign Financing  
Trust Fund Contribution☐
**\$5.00 May Be  
Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

**GRAY, ANDREA  
1313 63RD ST W  
BRADENTON FL 34209**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person named in Change of Registered Agent (if applicable)

Signature of Registered Agent (signature required when registered)

DATE

12. OFFICERS AND DIRECTORS

 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PST  
DUBUC, DON  
1313 63RD ST W  
BRADENTON FL**
☐ DELETE
 TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP
☐ DELETE
 TITLE  
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 CITY-ST-ZIP
☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, upon an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DON Dubuc

4-24-96

CR2E034 (12/95)