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Apr 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K91351**

(2)

1. Corporation Name

NATIONAL DYNAMICS, INC.



Principal Place of Business

Mailing Address

**C/O GUY PULLEN
5760 SHIRLEY ST UNIT 1
NAPLES FL 33942**

**C/O GUY PULLEN
5760 SHIRLEY ST UNIT 1
NAPLES FL 34109-1820**

3. Date Incorporated or Qualified

05/30/1989

3a. Date of Last Report

03/19/1996

2. Principal Place of Business

2a. Mailing Address

**491 CYPRESS WAY EAST
SUITE, APT. #, etc.**

**491 CYPRESS WAY EAST
SUITE, APT. #, etc.**

22. City & State

27. City & State

NAPLES FL

NAPLES FL

24. Zip

25. Country

29. Zip

30. Country

34110

U.S.A.

34110

U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PULLEN, GUY H
5760 SHIRLEY ST UNIT 1
NAPLES FL 33942**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **PULLEN, MARIA T. T.**
STREET ADDRESS **491 CYPRESS WAY EAST**
CITY - ST - ZIP **NAPLES FL**

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

TITLE ☐ DELETE

7.1 TITLE ☐ Change ☐ Addition

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY - ST - ZIP

TITLE ☐ DELETE

8.1 TITLE ☐ Change ☐ Addition

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY - ST - ZIP

SIGNATURE: **GUY H. PULLEN**

3/27/97

941/591-4247

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

0413908

CR2E034 (9/96)