## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L06923

Title:

Name:

Address:

City-St-Zip:

FILED Apr 14, 2009 Secretary of State

**Entity Name: DYNASYS CORPORATION Current Principal Place of Business: New Principal Place of Business:** 800 BELLEAIR RD CLEARWATER, FL 33756 **Current Mailing Address: New Mailing Address:** 800 BELLEAIR RD CLEARWATER, FL 33756 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BURKETT, BOBBY R 1960 SADDLE HILL, NORTH DUNEDIN, FL 34698 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO ( ) Delete Title: () Change () Addition SCHER, ROBERT A. Name: Name: 1840 OAK CREEK DR Address: Address: City-St-Zip: DUNEDIN EL City-St-Zip: Title: VD Title: () Delete (X) Change ( ) Addition BURKETT, BOBBY R. Name: BURKETT, BOBBY R. Name: 1960 SADDLE HILL, NORTH 1960 SADDLE HILL, NORTH Address: Address: DUNEDIN, FL 34698 US City-St-Zip: DUNEDIN, FL City-St-Zip: Title: (X) Change ( ) Addition Title: ( ) Delete GRAJALES, TOMAS E GRAJALES, TOMAS E Name: Name: 1614 SHEFFIELD DR 1614 SHEFFIELD DR Address: Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 33764 US

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.

Title:

Name:

Address:

City-St-Zip:

PD

SCHER, ROBERT A

1840 OAK CREEK DR

DUNEDIN, FL 34698 US

(X) Change ( ) Addition

SIGNATURE: BOBBY R. BURKETT VD 04/14/2009

() Delete

SCHER, ROBERT A

DUNEDIN, FL

1840 OAK CREEK DR