

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

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PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED

97 AUG 19 AM 8:02

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # L33570 (7)
 1. Corporation Name
DONALDSON SATELLITE & ELECTRONICS INC.

Principal Place of Business: **535 S FERDON BLVD CRESTVIEW FL 32539 US**
 Mailing Address: **535 S FERDON BLVD CRESTVIEW FL 32539 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-23)
 2a. Mailing Address (24-26)
 Suite, Apt. #, etc. (22, 27)
 City & State (23, 28)
 Zip (24, 29) Country (25, 30)

3. Date Incorporated or Qualified: **12/04/1989**
 3a. Date of Last Report: **04/08/1996**
 4. FEI Number: **59-2981239**
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Election Campaign Financing: **\$5.00 May Be Added to Fees**
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
DONALDSON, DONALD WAYNE
535 S FERDON BLVD
CRESTVIEW FL 32536

10. Name and Address of New Registered Agent
 81 Name: **Donaldson, Donald Wayne**
 82 Street Address (P.O. Box Number is Not Acceptable): **535 S. Ferdon Blvd**
 83
 84 City: **Crestview** FL 85 Zip Code: **32539**

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: *Donald Wayne Donaldson* DATE: **8/11/97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSDC <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DONALDSON, DONALD WAYNE	1.2 NAME	000002278880--6
STREET ADDRESS	535 S FERDON BLVD	1.3 STREET ADDRESS	-08/27/97--01102--020
CITY-ST-ZIP	CRESTVIEW FL	1.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE	VTD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AUBREY, DONALDSON	2.2 NAME	
STREET ADDRESS	535 S FERDON BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	CRESTVIEW FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

8-20-97

14. I do 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 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, or on an attachment with an address.

SIGNATURE: *Donald Wayne Donaldson* DATE: **8/11/97** **850 682-4831**

CR2E034 (4/97)

Donaldson Satellite

Donaldson Satellite
636 S. Ferdon Blvd.
Crestview, FL
32639

Phone: (904) 682-4831
Fax: (904) 689-2246

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Monday, August 11, 1997

Department of State
Annual Reports Section
P. O. Box 1500
Tallahassee, FL 32302-1500

Gentlemen:

I am writing concerning our 1997 Profit Corporation Annual Report. We did not receive our first notice. We did, however receive our second notice stating our filing fee is now \$550.00. Upon examing the packet, I noticed our address inside the packet was correct. However, the address on the outside of the packet was our old zip code. Much of our mail does not reach us with this old zip code address. On August 11, 1997 I telephoned Darlene Connell at 904 488-9000 concerning this matter and she instructed me to enclose a check in the original amount of \$165.00 with my report. I have also enclosed a copy of the address to which the packet was sent. If there is anything further required of me please advise.

Sincerely:

Donald Wayne Donaldson



President