

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
Mar 14 1996 8:00 am  
Secretary of State

DOCUMENT # P95000005975 (4)

1. Corporation Name

SYNADYNE V, INC.

Principal Place of Business

Mailing Address

8000 N. FEDERAL HIGHWAY  
BOCA RATON FL 33487

8000 N. FEDERAL HIGHWAY  
BOCA RATON FL 33487



3. Date Incorporated or Qualified

3a. Date of Last Report

01/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NUGENT, BRIAN M  
106 E. COLLEGE AVENUE  
SUITE 1200  
TALLAHASSEE FL 32301

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 in the applicable block

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President & Director	1.1 TITLE	
NAME	Paul M. Burrell	1.2 NAME	
STREET ADDRESS	8000 N. Federal Highway	1.3 STREET ADDRESS	
CITY-STATE-ZIP	Boca Raton, FL 33487	1.4 CITY-STATE-ZIP	
TITLE	Vice President	2.1 TITLE	
NAME	Joseph F. Bello	2.2 NAME	
STREET ADDRESS	8000 N. Federal Highway	2.3 STREET ADDRESS	
CITY-STATE-ZIP	Boca Raton, FL 33487	2.4 CITY-STATE-ZIP	
TITLE	Treasurer	3.1 TITLE	
NAME	Robert E. Tomlinson	3.2 NAME	
STREET ADDRESS	8000 N. Federal Highway	3.3 STREET ADDRESS	
CITY-STATE-ZIP	Boca Raton, FL 33487	3.4 CITY-STATE-ZIP	
TITLE	Secretary & Director	4.1 TITLE	
NAME	Lawrence H. Schubert	4.2 NAME	
STREET ADDRESS	8000 N. Federal Highway	4.3 STREET ADDRESS	
CITY-STATE-ZIP	Boca Raton, FL 33487	4.4 CITY-STATE-ZIP	
TITLE	Director	5.1 TITLE	
NAME	Louis A. Mirelli	5.2 NAME	
STREET ADDRESS	8000 N. Federal Highway	5.3 STREET ADDRESS	
CITY-STATE-ZIP	Boca Raton, FL 33487	5.4 CITY-STATE-ZIP	
TITLE	Director	6.1 TITLE	
NAME	Alan E. Schubert	6.2 NAME	
STREET ADDRESS	8000 N. Federal Highway	6.3 STREET ADDRESS	
CITY-STATE-ZIP	Boca Raton, FL 33487	6.4 CITY-STATE-ZIP	

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 the 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 of this report or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

3/5/96 1407/997-5000 X264

Date

Daytime Phone

CR2E034 (12/95)