## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000016126 (0)

SCANDIA TECHNOLOGIES, INC.

Principal Place of Business Mailing Address

2051 SUNNYDALE BLVD **CLEARWATER FL 34625** 

**DOCUMENT #** 

2051 SUNNYDALE BLVD **CLEARWATER FL 34625** 

## FILED Feb 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/21/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3364447 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired  $\Box$ 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Ζıρ Country This corporation owes or has paid the current year Intangible 24 Yes Yes 25 29 Personal Property Tax due June 30. ☐ No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MILLER, GARY M 2051 SUNNYDALE BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **CLEARWATER FL 34625** 83 84 City Zip Code 85 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 it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change \* Addition MILLER, GARY M Harry D. Shood 2051 Sunnydale Blood NAME 1.2 NAME **504 WALKER ROAD** STREET ADDRESS 1.3 STREET ADDRESS SAFETY HARBOR FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE **EVPD** 2.1 TITLE Addition Gunba, Stephen L, NAME GURBA, STEPHEN L 2.2 NAM 2938 ELYSIUM WAY 2.3 STREE ADDRESS STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 31 TITLE Channe Addition NAME LOY, JEFFREY A 3.2 NAME 2871 GLORIA COURT STREET ADDRESS 3.3 STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Addition Schner, Craig SCHNEE, CRAIG NAME , 2 NAME 1480 WYNDHAM DR S STREET ADDRESS 4.3 STREET ADDRESS YORK PA CITY-ST-ZIP 4.4 CITY - ST - ZiP DELETE TITLE Addition 5 1 TITLE NAME PERFETTI, MICHAEL J 2 NAME 971 NORTHRIDGE DR 5.3 STREET ADDRESS STREET ADDRESS Palm Harbor Fl CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 61 TITLE Change ■ Addition GOELLER, MICHAEL J NAME 62 NAME 101 QUEEN ST STREET ADDRESS 63 STREET ADDRESS **LANCASTER PA** 

14. Thereby 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:

1/19/98