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FILED  
May 16 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000024360 (5)

1. Corporation Name

GATETRONICS, INC.

Principal Place of Business  
445 SOUTH ORLANDO AVENUE  
COCOA BEACH FL 32931

Mailing Address  
445 SOUTH ORLANDO AVENUE  
COCOA BEACH FL 32931-2503

3. Date Incorporated or Qualified

03/19/1996

3a. Date of Last Report

2. Principal Place of Business

21 445 S. Orlando Ave.

Suite, Apt. #, etc.

22 City & State

23 Cocoa Beach, FL

24 Zip 32931-2503 Country Brevard

2a. Mailing Address

26 PO Box 320127

Suite, Apt. #, etc.

27 City & State

28 Cocoa Beach, FL

29 Zip 32932-0127 Country Brevard

4. FEI Number

59-3376723

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

Trust Fund Contribution

☐

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KOSTRO, VICTOR S ESQ  
1825 SOUTH RIVERVIEW DRIVE  
MELBOURNE FL 32901

10. Name and Address of New Registered Agent

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

TITLE D President & CEO ☐ DELETE  
NAME TURNER, STEVEN G  
STREET ADDRESS 445 SOUTH ORLANDO AVENUE  
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE VP of Technical Support ☐ Change ☒ Addition  
1.2 NAME Dean G. Theobald  
1.3 STREET ADDRESS 1625 Jolson Court  
1.4 CITY-ST-ZIP Merritt Island, FL 32953

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Steven G. Turner, President

4/25/96 407-799-9344

0102707

CR2E034 (9/96)