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FILED

Apr 28 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000036750 (3)

1. Corporation Name
DYNATECH ASSOCIATES, INC.



Principal Place of Business

4500 140TH AVE N
STE 115
CLEARWATER FL 34622
US

Mailing Address

4500 140TH AVE N
STE 115
CLEARWATER FL 34622
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/29/1996

2. Principal Place of Business

21 207 VOLLMER AVE
Suite, Apt. #, etc.

22 City & State
23 OLDSMAR FLA
24 Zip 34677
25 Country PINELLAS

26 207 VOLLMER AVE
Suite, Apt. #, etc.

27 City & State
28 OLDSMAR FLA
29 Zip 34677
30 Country PINELLAS

9. Name and Address of Current Registered Agent

ZSCHUA, JULIUS J
911 CHESTNUT STREET
CLEARWATER FL 34618

4. FEI Number

59-3389233

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$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

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 fee if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MORTENSEN, CHARLES E JR
STREET ADDRESS 618 OLD OAK CIRCLE
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE D
NAME SWICK, CARLTON R
STREET ADDRESS 618 OLD OAK CIRCLE
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

JAMES EVANS

1660 KINSMERE DR.
NEW PORT RICHEY FLA. 34655

14. I 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 my attachment with an address.

SIGNATURE

22 APRIL 98 813-855-6461

CR2E034 (10/97)