

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000082668

1. Entity Name
OMNIDYNE, INC.

FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90020 029 ***558.75

Principal Place of Business

2441 WEYMOUTH DRIVE
CLEARWATER FL 33764

Mailing Address

2441 WEYMOUTH DRIVE
CLEARWATER FL 33764

2. Principal Place of Business

2445 Weymouth Dr
Suite, Apt. #, etc.

3. Mailing Address

2445 Weymouth
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

CLEARWATER, FL

City & State

CLEARWATER, FL

4. FEI Number

59-3540468

Applied For

Not Applicable

Zip

33764

Country

FLORIDA

Zip

33764

Country

FLORIDA

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARSENAULT, KENNETH G JR.
10225 ULMERTON ROAD
SUITE 2
LARGO FL 33771

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☒ Delete
NAME DUFFY, PATRICK
STREET ADDRESS 2441 WEYMOUTH DRIVE
CITY-ST-ZIP CLEARWATER FL 33764

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME David L Goulet
STREET ADDRESS 2445 Weymouth Dr.
CITY-ST-ZIP Clearwater, Fla 33764

TITLE ☐ Change ☒ Addition
NAME Steven Sullivan
STREET ADDRESS 19504 Wyndill Cir.
CITY-ST-ZIP Odessa, Fla. 33556

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID L Goulet

Date

8-3-00

Daytime Phone #

727-544-0570

CR2E034 (5/00)