2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000036917

1. Entity Name
ASTRODETICS, INC.

Principal Place of Business	Mailing Address
384 SOUTH CREEK COURT	384 SOUTH CREEK COURT
OSPREY, FL 34229	OSPREY, FL 34229

DO NOT WRITE IN THIS SPACE

04012004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0930361	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DENNIS, ARTHUR R
384 SOUTH CREEK COURT
OSPREY, FL 34229

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

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04/07/04-80005-024  150.00
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10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DENNIS, ARTHUR R
STREET ADDRESS	384 SOUTH CREEK COURT
CITY-ST-ZIP	OSPREY, FL 34229

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   4/5/04   941-918-9650

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #