

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000038319

1. Entity Name
DYNA-AIR CORPORATION

FILED
Sep 15, 2000 8:00 am
Secretary of State

09-15-2000 90002 027 ***558.75

Principal Place of Business

12291 TOWNE LAKE DRIVE
FT. MYERS FL 33913

Mailing Address

12291 TOWNE LAKE DRIVE
FT. MYERS FL 33913

AVU77824



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3580 Shaw Boulevard
Suite, Apt. #, etc.
100

3. Mailing Address

3580 Shaw Boulevard
Suite, Apt. #, etc.
100

City & State

Naples, Florida

City & State

Naples, Florida

4. FEI Number

65-0930759

Applied For

Not Applicable

Zip

34117

Country

USA

Zip

34117

Country

USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHAW, JAMES
12291 TOWNE LAKE DRIVE
FT. MYERS FL 33913

Name

James R. Shaw

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

3580 Shaw Boulevard

Suite 100

City

Naples

FL

Zip Code

34117

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

James R. Shaw

James R. Shaw, President-Director

9-10-00

(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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President & Director	<input type="checkbox"/> Delete
NAME	James R. Shaw	
STREET ADDRESS	3580 Shaw Boulevard	
CITY-ST-ZIP	Naples, FL 34117	
TITLE	First Vice President & Director	<input type="checkbox"/> Delete
NAME	Stephen A. Marshall	
STREET ADDRESS	10 Ammon Drive	
CITY-ST-ZIP	Manchester, NH 03103	
TITLE	2nd Vice President & Director	<input type="checkbox"/> Delete
NAME	R. Douglas Patton	
STREET ADDRESS	3580 Shaw Boulevard	
CITY-ST-ZIP	Naples, FL 34117	
TITLE	Secretary and Director	<input type="checkbox"/> Delete
NAME	Frank D. Pasquale	
STREET ADDRESS	10 Ammon Drive	
CITY-ST-ZIP	Manchester, NH 03103	
TITLE	Treasurer	<input type="checkbox"/> Delete
NAME	F. Grant Westerman	
STREET ADDRESS	3580 Shaw Boulevard	
CITY-ST-ZIP	Naples, FL 34117	
TITLE	Assistant Secretary	<input type="checkbox"/> Delete
NAME	Lee A. Edwards	
STREET ADDRESS	3580 Shaw Boulevard	
CITY-ST-ZIP	Naples, FL 34117	

TITLE	Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dennis E. Downes	
STREET ADDRESS	3580 Shaw Boulevard	
CITY-ST-ZIP	Naples, FL 34117	
TITLE	Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Glen Hines	
STREET ADDRESS	10 Ammon Drive	
CITY-ST-ZIP	Manchester, NH 03103	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

James R. Shaw
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James R. Shaw

09-10-00

941-304-1000

Date

Daytime Phone #

CR2E034 (5/00)