

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

• PROFIT CORPORATION ANNUAL REPORT 1996



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

pg. 1 of 2

DOCUMENT # 646862 (3)
1. Corporation Name
THE DUNN CORPORATION



Principal Place of Business: 415 ORANGE AVE, P. O. BOX 2180, DAYTONA BEACH FL 32115-2180, US
Mailing Address: 415 ORANGE AVE, P. O. BOX 2180, DAYTONA BEACH FL 32115-2180, US

3. Date Incorporated or Qualified: 08/31/1979
3a. Date of Last Report: 01/31/1995
4. FEI Number: 59-1932873
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 has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-sections for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent

DUNN, EDGAR M.JR.
347 SO RIDGEWOOD AVE
DAYTONA BCH FL 32114

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUNN, SAMUEL G	1.2 NAME	
STREET ADDRESS	42 CHOCTAW TR	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH FL	1.4 CITY-ST-ZIP	32174
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUNN, EDGAR M. SR.	2.2 NAME	
STREET ADDRESS	1141 FLORIDA AVE.	2.3 STREET ADDRESS	404 S BEACH ST, APT 1201
CITY-ST-ZIP	DAYTONA BEACH FL	2.4 CITY-ST-ZIP	DAYTONA BEACH FL 32114
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUNN, AUSTIN L	3.2 NAME	
STREET ADDRESS	1910 SOUTH PENINSULA DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	3.4 CITY-ST-ZIP	32118
TITLE	VD <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUNN, BARRY R	4.2 NAME	
STREET ADDRESS	3309 OAK VISTA DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	4.4 CITY-ST-ZIP	32124
TITLE	VD <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUNN, EDGAR M., JR.	5.2 NAME	
STREET ADDRESS	34 IROQUOIS TR	5.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH FL	5.4 CITY-ST-ZIP	32174
TITLE	VTSD <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICE, W. STEPHEN	6.2 NAME	
STREET ADDRESS	40 RIVERIDGE TRAIL	6.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH FL	6.4 CITY-ST-ZIP	32174

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 checked for on an attachment with an address.

SIGNATURE: *W. Stephen Rice* W. Stephen Rice, VP 1/22/96 904-226-3880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)

**THE DUNN CORPORATION
DOCUMENT #646862
ATTACHMENT TO 1996 CORPORATION ANNUAL REPORT**

BLOCK 12 - OFFICERS AND DIRECTORS

TITLE	D
NAME	JAMES R DUNN
ADDRESS	746 RIVERSIDE DR
CITY-ST-ZIP	ORMOND BEACH, FL 32174

TITLE	V
NAME	GARY V FARBER
ADDRESS	117 N THORNTON AVE
CITY-ST-ZIP	ORLANDO, FL 32801