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Feb 06 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1997



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

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



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

3. Date Incorporated or Qualified **08/31/1979** 3a. Date of Last Report **04/02/1996**
 4. FEI Number **59-1932873** 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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip Country 28 Zip Country
 24 25 29 30

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 **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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DUNN, SAMUEL G	
STREET ADDRESS	42 CHOCTAW TR	
CITY-ST-ZIP	ORMOND BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DUNN, EDGAR M. SR.	
STREET ADDRESS	404 S BEACH ST, APT 1201	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DUNN, AUSTIN L	
STREET ADDRESS	1910 SOUTH PENINSULA DR	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	DUNN, BARRY R	
STREET ADDRESS	3309 OAK VISTA DRIVE	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	DUNN, EDGAR M., JR.	
STREET ADDRESS	34 IROQUOIS TR	
CITY-ST-ZIP	ORMOND BEACH FL	
TITLE	VTSD	<input type="checkbox"/> DELETE
NAME	RICE, W. STEPHEN	
STREET ADDRESS	40 RIVERIDGE TRAIL	
CITY-ST-ZIP	ORMOND BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 on an attachment with an address.

SIGNATURE: *W. Stephen Rice* **W. Stephen Rice, VP** 1/15/97 904-226-3880
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

**THE DUNN CORPORATION
DOCUMENT #646862
ATTACHMENT TO 1997 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