

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 646862

FILED
Jan 12, 2005
Secretary of State

Entity Name: THE DUNN CORPORATION

Current Principal Place of Business:

200 S. SEGRAVE ST
DAYTONA BEACH, FL 32114 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2180
DAYTONA BEACH, FL 321152180 US

New Mailing Address:

FEI Number: 59-1932873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBSTER, DANIEL J
149 S RIDGEWOOD AVE
SUITE 500
DAYTONA BCH, FL 32114 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUNN, SAMUEL G
Address: 42 CHOCTAW TR
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: D () Delete
Name: DUNN, JAMES R
Address: 746 RIVERSIDE DR
City-St-Zip: ORMOND BEACH, FL 32176 US

Title: D () Delete
Name: DUNN, AUSTIN L
Address: 1910 SOUTH PENINSULA DR
City-St-Zip: DAYTONA BEACH, FL 32118 US

Title: PD () Delete
Name: DUNN, BARRY R
Address: 3309 OAK VISTA DR
City-St-Zip: DAYTONA BEACH, FL 32124 US

Title: VTSD () Delete
Name: RICE, W. STEPHEN
Address: 40 RIVERRIDGE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VD () Delete
Name: FARBER, GARY V
Address: 117 THORNTON AVE
City-St-Zip: ORLANDO, FL 32801 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. STEPHEN RICE

VTSD

01/12/2005

Electronic Signature of Signing Officer or Director

_____ Date