

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 25, 2005 8:00 am
Secretary of State

07-25-2005 90098 047 ***158.75



DOCUMENT # P04000118519
 1. Entity Name
LUNDMAN GROUP, INC.

Principal Place of Business Mailing Address
 905 WRENWOOD LANE 905 WRENWOOD LANE
 ALTAMONTE SPRINGS FL 32714 ALTAMONTE SPRINGS FL 32714



2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E034 (10/04)

City & State City & State

4. FEI Number
51-0519497 Applied For
 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent
GAUSTAD, LINDA L ESQ.
815 S. VOLUSIA AVENUE, SUITE 1
ORANGE CITY FL 32763

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUNDMAN, DANIEL 905 WRENWOOD LANE ALTAMONTE SPRINGS FL 32714	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 title empowered.

SIGNATURE: *Daniel J. Lundman* Daniel J. Lundman 7-19-05 407-760-9876
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

50052304
P04-006118519

Lundman Group Inc.

905 Wrenwood Ln.
Altamonte Springs, FL 32714
Phone: (321)422-0115
Cell: (407)760-9876
djrock787878@aol.com

July 19, 2005

Dear Friend,

This letter is to inform the Division of corporations that I had not received this form until recently. I received the post card in the mail and the form was sent. I don't know why I did not receive this form. I would like to apologize for any inconvenience. This is my first year of having a corporation. I will make sure that this will not happen again. Thank you for your cooperation concerning this matter.

Sincerely,
Daniel J. Lundman

Signature

