

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N39761

**FILED**  
**Jan 07, 2021**  
**Secretary of State**  
**3552040587CC**

**Entity Name:** DUNBAR CENTER, INC.

**Current Principal Place of Business:**

12100 SE LANTANA AVE  
HOBE SOUND, FL 33455

**Current Mailing Address:**

12100 SE LANTANA AVE  
HOBE SOUND, FL 33455 US

**FEI Number:** 65-0216826

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REYNOSO, WENDY  
12100 SE LANTANA AVENUE  
HOBE SOUND, FL 33455 US

*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:** WENDY REYNOSO

01/07/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title MEMBER  
Name DAUGHTREY, VIOLA  
Address 10152 SE WILLIAMS DR  
City-State-Zip: HOBE SOUND FL 33455

Title CO-PRESIDENT  
Name ZUNINO, SALLY  
Address 37 NORTH BEACH  
City-State-Zip: HOBE SOUND FL 33455

Title MEMBER  
Name STEELE, W. TRENT  
Address 10995 SE FEDERAL HWY  
9  
City-State-Zip: HOBE SOUND FL 33455

Title CO-PRESIDENT  
Name WALKER, BORDEN  
Address 107 BASSETT CREEK TRAIL  
City-State-Zip: HOBE SOUND FL 33455

Title SECRETARY  
Name LETTENGARVER, BETH  
Address 10331 SE JUPITER NARROWS DRIVE  
City-State-Zip: HOBE SOUND FL 33455

Title MEMBER  
Name OBRIEN, ANNE  
Address 7751 SE LITTLE HARBOUR DRIVE  
City-State-Zip: HOBE SOUND FL 33455

Title MEMBER  
Name PRESTON, DEMETRIUS  
Address PO BOX 111  
City-State-Zip: HOBE SOUND FL 33455

Title MEMBER  
Name SCHULTE, DOMINIQUE  
Address 34 N BEACH ROAD  
City-State-Zip: HOBE SOUND FL 33455

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*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BORDEN WALKER

PRESIDENT

01/07/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title MEMBER  
Name LAURA, TRAPHAGEN  
Address 59 LINKS ROAD  
City-State-Zip: HOBE SOUND FL 33455

Title SECRETARY  
Name PHILLIPS, KAREN  
Address 9995 SE FEDERAL HIGHWAY  
#575  
City-State-Zip: HOBE SOUND FL 33455