


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # 225460 1. Entity Name THE W.B. DUNN COMPANY, INC.	
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Principal Place of Business 1242 N JEFFERSON STREET MONTICELLO, FL 32344 US	Mailing Address 1242 N JEFFERSON STREET MONTICELLO, FL 32344 US
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DO NOT WRITE IN THIS SPACE



01262005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-0871087	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  DUNN, EUGENIA P 1242 N JEFFERSON STREET MONTICELLO, FL 32344
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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 Eugenia Dunn (NOTE: Registered Agent signature required when reinstating) DATE 1-28-05

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	UN0000205805 01/31/05-80052-002 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DUNN, EUGENIA P. 1080 E WASHINGTON MONTICELLO, FL 32344
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V DUNN, WALTER 1080 E WASHINGTON MONTICELLO, FL 32344
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T GRABENSTEIN, ELIZABETH 6523 ALDERLEY WAY WEST BLOOMFIELD, MI 48322
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 like empowered.

SIGNATURE: Eugenia Dunn Eugenia Dunn (850) 997-2013  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #