2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 359714

Entity Name: GLENN HUNTER CORPORATION

FILED Jan 22, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
327 OFFICE PLAZA DRIVE SUITE 203							
	SEE, FL 32301						
Current Mailing Address:				New Mailing Address:			
327 OFFICE PLAZA DRIVE SUITE 203 TALLAHASSEE, FL 32301							
FEI Number: 59-1513659 FEI Number Applied For () FE		FEI Num	umber Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent: Name and Address of N						New Regis	tered Agent:
HUNTER, GLENN A 110 WINN CAY DRIVE. TALLAHASSEE, FL 32312 US				HUNTER, GLENN A 2449 ARVAH BRANCH BLVD TALLAHASSEE, FL 32309 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: GLENN A. HUNTER 01/22/2007							
Electronic Signature of Registered Agent				Date			
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	HUNTER, GLEN	ZA DRIVE, SUITE 203		Title: Name: Address: City-St-Zip:	() Change()	Addition
Title: Name: Address: City-St-Zip:	S () E HUNTER, RACHE 110 WINN CAY D TALLAHASSEE, F	RIVE		Title: Name: Address: City-St-Zip:	S (X HUNTER, RACI 327 OFFICE P TALLAHASSEE	LAZA DR.	Addition
Title: Name: Address: City-St-Zip:	HUNTER, KYLÉ	Delete ZA DR., SUITE 203 FL 32301		Title: Name: Address: City-St-Zip:	() Change()	Addition
Title: Name: Address: City-St-Zip:	HUNTER, KEITH	Delete ZA DR., SUITE 203 FL 32301		Title: Name: Address: City-St-Zip:	() Change()	Addition
Title: Name: Address: City-St-Zip:	GOODNER, KIME	ZA DR., SUITE 203		Title: Name: Address: City-St-Zip:	() Change()	Addition
Title: Name: Address: City-St-Zip:	D () E HUNTER, KAREN 110 WINN CAY D TALLAHASSEE, F	RIVE		Title: Name: Address: City-St-Zip:	D (X MCINTOSH, KA 327 OFFICE P TALLAHASSEE	LAZA DR.	Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GLENN A. HUNTER PD 01/22/2007