

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 392247

FILED
Mar 24, 2009
Secretary of State

Entity Name: DUNN BROTHERS, INC.

Current Principal Place of Business:

220 S GRAVES RD (OFF ORANGE AVE)
FT PIERCE, FL 34954

New Principal Place of Business:

220 S GRAVES RD (OFF ORANGE AVE)
FT PIERCE, FL 34945

Current Mailing Address:

220 S GRAVES RD (OFF ORANGE AVE)
FT PIERCE, FL 34954

New Mailing Address:

220 S GRAVES RD (OFF ORANGE AVE)
FT PIERCE, FL 34945

FEI Number: 59-1371357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNN, EARNEST R.
14105 ANGLE RD.
FORT PIERCE, FL 34945 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, EARNEST R.,
Address: 14105 ANGLE ROAD
City-St-Zip: FORT PIERCE, FL

Title: ST () Delete
Name: DUNN CLEOPATRA B.,
Address: 14105 ANGLE ROAD
City-St-Zip: FORT PIERCE, FL

Title: VD () Delete
Name: BROLMANN, LAURA L
Address: 2414 TAMARIND AVE.
City-St-Zip: FT PIERCE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DUNN, EARNEST R.,
Address: 14105 ANGLE ROAD
City-St-Zip: FORT PIERCE, FL 34945

Title: ST (X) Change () Addition
Name: DUNN CLEOPATRA B.,
Address: 14105 ANGLE ROAD
City-St-Zip: FORT PIERCE, FL 34945

Title: VD (X) Change () Addition
Name: BROLMANN, LAURA L
Address: 2414 TAMARIND AVE.
City-St-Zip: FT PIERCE, FL 34949

I hereby certify that the information supplied with this filing does not qualify 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: CLEOPATRA B. DUNN

ST

03/24/2009

Electronic Signature of Signing Officer or Director

Date