2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008
Secretary of State

DOCUMENT# 504139

Entity Name: MARLON DUNN CONTRACTING, INC.

Current Principal Place of Business:

3115 W. SAMMONDS ROAD
P. O. BOX 1357
PLANT CITY, FL 33563 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1357
P. O. BOX 1357
PLANT CITY, FL 33564 US

New Mailing Address:

FEI Number: 59-1677664 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DUNN, MARLON
2206 N HAWKE GRIFFIN RD.
PLANT CITY, FL 33565 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 (X).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DUNN, MONTEEN
Address: HAWKE-GRIFFIN RD
City-St-Zip: PLANT CITY, FL 33565

Title: V ( ) Delete
Name: SECOR, DAN,
Address: HAWKE-GRIFFIN ROAD
City-St-Zip: PLANT CITY, FL 33565

Title: S ( ) Delete
Name: DUNN, MARLON
Address: HAWK GRIFFIN RD
City-St-Zip: PLANT CITY, FL 33565

Title: V ( ) Delete
Name: SECOR, BRIAN D
Address: 2204 HAWK GRIFFIN RD
City-St-Zip: PLANT CITY, FL 33565 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MONTEEN DUNN PRES 02/04/2008

Electronic Signature of Signing Officer or Director Date