2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#725600

T FILED
Mar 21, 2007
Secretary of State

Entity Name: BUNKER HILL, INC. **Current Principal Place of Business: New Principal Place of Business:** 2180 WEST STATE ROAD, 434 SUITE #5000 LONGWOOD, FL 32779 **New Mailing Address: Current Mailing Address:** 2180 WEST STATE ROAD, 434 SUITE #5000 LONGWOOD, FL 32779 US FEI Number: 59-1890264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HART, JAMES W JR SENTRY MANAGEMENT, INC. 2180 W SR 434, STE #5000 LONGWOOD, FL 32779 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete () Change () Addition ELLIOTT, RUSSELL Name: Name: 1051 S HIGHLAND ST #7B Address: Address: City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: Title: PD () Delete Title: PD (X) Change () Addition LASHAR, RUTH Name: LASHAR, RUTH Name: Address: 1051 S HIGHLAND ST #2E Address: 1051 S HIGHLAND ST #2A City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: MOUNT DORA, FL 32757 Title: () Delete Title: () Change () Addition WALTERS, STEVE Name: Name: Address: 1051 S HIGHLAND ST #1A Address: City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: Title: SD () Delete Title: () Change () Addition JARDINE, CHARLOTTE Name: Name: 1051 S HIGHLAND ST #7D Address: Address: City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: Title: () Delete Title: (X) Change () Addition ROSSHEIM, DIDI Name: Name: KLINGAMAN, PATRICIA PO BOX 709 1051 S HIGHLAND ST #2E Address: Address: City-St-Zip: MOUNT DORA, FL 32756 City-St-Zip: MOUNT DORA, FL 32757

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

SIGNATURE: RUTH LASHAR PD 03/21/2007