# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jul 10, 2006**
**Secretary of State**

DOCUMENT# G20763

**Entity Name:** COMPUTER PROFESSIONALS UNLIMITED, INC.

**Current Principal Place of Business:**

% GUSTAVE DUBBS
4306 N TAMIAMI TRAIL
SARASOTA, FL 34234

**New Principal Place of Business:**

% GUSTAVE DUBBS
6321 PORTER RD SUITE 13
SARASOTA, FL 34241

**Current Mailing Address:**

% GUSTAVE DUBBS
4306 N TAMIAMI TRAIL
SARASOTA, FL 34234

**New Mailing Address:**

% GUSTAVE DUBBS
6321 PORTER RD SUITE 13
SARASOTA, FL 34241

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

**Name and Address of Current Registered Agent:**

DUBBS, GUSTAVE
6409 KYLIE CREEK WAY
SARASOTA, FL 34242 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

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: DUBBS, GUSTAVE,
Address: 6409 KYLIE CREEK WAY
City-St-Zip: SARASOTA, FL 34242

Title: VS ( ) Delete
Name: MCKENNA, DIANE
Address: 2624 SIESTA DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: PTD ( ) Delete
Name: DUBBS, DANIEL.,
Address: 3601 AZALEA LANE
City-St-Zip: SARASOTA, FL 34240

**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:

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: DAN DUBBS OFF 07/10/2006

Electronic Signature of Signing Officer or Director — Date