2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G87986



FILED Feb 23, 2006 8:00 am Secretary of State

1. Entity Nam	DUNTAIN LAKE CORPORA				90017 040 ***15						
% PAUL M. I 105 S. NARO West Palm	SSUS AVENUE, SUITE 312 Beach, FL 33401	Mailing Address % Paul M. Paddock 105 S. Narcissus Aven West Palm Beach, Fl									
105 5.	Place of Business Natcissus Aue.		issus Auc								
Suite, Apt.	k 402	Suite, Apt. #, etc. Suite 40	2_	01182006	Chg-P	CR2E034 (11/05)					
City & State	Palm Beach, FL-	City & State West Palm		4. FEI Number 59-238		No	oplied For ot Applicable				
Zip 33	401 Palme U.S.A.	^{Zip} 33401	Country U.S.A.	5. Certificate	of Status Desired	S8.75 Add Fee Require	ditional id				
	6. Name and Address of Current 6	Registered Agent		7. Name and	Address of New F	Registered Agent					
	K, PAUL M.		Name +	aul M	. Padd	oc/L					
105 S. NARCISSUS AVENUE SUITE 312			Street Addre	Street Address (P.O. Box Number is Not Acceptable)							
WEST PALM BEACH, FL 33401			City 1 . J	Suite 402							
			'VVe	est Yalr	n Beac	ん FL 翌39	401				
8. 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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE X Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent segnature required when reinstating) DATE											
		and title if applicable. (NOTE:	Registered Agent signature req		•	DATE					
FIL After M	Signature, typed or printed name of registered agent a printed in the second special second se	9. Election Campaig Trust Fund Contrit	n Financing	\$5.00 May Be Added to Fees		/ DAFÉ					
FIL After M	Signature, typed or printed name of registered agent a E NOWILL FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaig Trust Fund Contrit	n Financing studion.	\$5.00 May Be Added to Fees	CHANGES TO OFF	CICERS AND DIRECTOR					
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute thiereport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE: 🔀	m	- sardel	2/20/00		(561)655-105
/	SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING OFFICER OR DIRECTO	e / //	Cate	Daytime Phone #
	Paul	W · AAAAAC	4		