2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H94100

Entity Name: GUNNALLEN FINANCIAL, INC.

FILED Feb 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5002 W. WATERS AVE TAMPA, FL 33634 **Current Mailing Address: New Mailing Address:** 5002 W. WATERS AVE TAMPA, FL 33634 FEI Number: 59-2624567 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: GUNN, DONALD J JR 5002 W WATERS AVE TAMPA, FL 33634 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DCFO () Delete Title: CFO (X) Change () Addition Name: FRUEH, RICHARD Name: FRUEH, RICHARD 4509 BEACH PARK DR 4509 BEACH PARK DR Address: Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607 DP Title: PRES Title: () Delete (X) Change () Addition GUNN, DONALD J JR Name: Name: GUNN, DONALD J JR 17911 BINIMI ISLE 17911 BINIMI ISLE Address: Address: TAMPA, FL 33647 City-St-Zip: City-St-Zip: TAMPA, FL 33647 Title: Title: DST () Delete SEC (X) Change () Addition FAY, BRADLEY FAY, BRADLEY Name: Name: 18207 BITTERN AVE 18207 BITTERN AVE Address: Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: LUTZ, FL 33549 Title: EVP () Delete Title: CFO (X) Change () Addition NUMMI, RICHARD M O'BEIRNE, DECLAN E Name: Name: Address: 9804 WOODBAY DR Address: 16208 HOYLAKE DR City-St-Zip: City-St-Zip: TAMPA, FL 33626 ODESSA, FL 33556 Title: CCO Title: () Delete () Change () Addition ELLIS, MARC Name: Name: 5002 W WATERS AVE Address: Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: Title: (X) Delete Title: () Change () Addition TROSPER, JED Name: Name: 4805 WOODMERE RD Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33609

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: DONALD J. GUNN PRES 02/01/2006