2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2007
Secretary of State

DOCUMENT# H94100

Entity Name: GUNNALLEN FINANCIAL, INC.

Current Principal Place of Business:

5002 W. WATERS AVE
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

5002 W. WATERS AVE
TAMPA, FL 33634

New Mailing Address:

FEI Number: 59-2624567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUNN, DONALD J JR
5002 W WATERS AVE
TAMPA, FL 33634 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 ( ).

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: FRUEH, RICHARD
Address: 4509 BEACH PARK DR
City-St-Zip: TAMPA, FL 33607

Title: PRES ( ) Delete
Name: GUNN, DONALD J JR
Address: 17911 BINIMI ISLE
City-St-Zip: TAMPA, FL 33647

Title: SEC ( ) Delete
Name: FAY, BRADLEY
Address: 18207 BITTERN AVE
City-St-Zip: LUTZ, FL 33549

Title: CFO ( ) Delete
Name: O'BEIRNE, DECLAN E
Address: 16208 HOYLAKE DR
City-St-Zip: ODESSA, FL 33556

Title: CCO ( ) Delete
Name: ELLIS, MARC
Address: 5002 W WATERS AVE
City-St-Zip: TAMPA, FL 33647

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:

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: DECLAN O'BEIRNE MR 02/28/2007

Electronic Signature of Signing Officer or Director — Date