

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 08:00-AM
Secretary of State

DOCUMENT # J25236
 1. Entity Name
DUNKLE'S FUEL SERVICE, INC.



Principal Place of Business 8220 LEO KIDD AVENUE PORT RICHEY, FL 34668	Mailing Address 8220 LEO KIDD AVENUE PORT RICHEY, FL 34668
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DO NOT WRITE IN THIS SPACE



01102006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2692038	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 GARRABRANTS, E.L., JR.
 6709 RIDGE RD.
 SUITE 106
 PORT RICHEY, FL 33568

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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 *Cecil Gregge Dasher Pres.* 1/12/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	DASHER, CECIL GREGGE
STREET ADDRESS	911 RIVERSIDE DR.
CITY-ST-ZIP	TARPON SPRINGS, FL
TITLE	D
NAME	DASHER, GAIL
STREET ADDRESS	911 RIVERSIDE DR.
CITY-ST-ZIP	TARPON SPRINGS, FL
TITLE	D
NAME	DASHER, GILBERT
STREET ADDRESS	3175 ALT. 19. N.
CITY-ST-ZIP	PALM HARBOR, FL
TITLE	D
NAME	HOLE, LEGARE R., JR.
STREET ADDRESS	381 W. WINDS DR.
CITY-ST-ZIP	PALM HARBOR, FL
TITLE	D
NAME	HOLE, BEVERLY D.
STREET ADDRESS	381 W. WINDS DR.
CITY-ST-ZIP	PALM HARBOR, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 01/19/06-80037-013 150.00

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Cecil Gregge Dasher Pres.* 1/12/06 727-245-4162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #