

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006426

FILED
May 01, 2009
Secretary of State

Entity Name: DUNBAR MIDDLE O.P.U.S., INC.

Current Principal Place of Business:

3717 HANOVER STREET
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

3717 HANOVER STREET
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 32-0147992 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCNEILL, RYAN L
3717 HANOVER STREET
FORT MYERS, FL 33901 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WEINSTEIN, HETTY
Address: 4750 WINKER AVE EXT.
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: KORDONOWKY, MARGARET
Address: 4750 WINKER AVE EXT
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: MCNEIL, RYAN L
Address: 3717 HANOVER ST
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: JOSLYN, SALLY
Address: 4750 WINKER AVE EXT
City-St-Zip: FORT MYERS, FL 33912

Title: DT (X) Delete
Name: JABLONSKI, KELLY
Address: 4750 WINKLER AVE EXT
City-St-Zip: FORT MYERS, FL 33912

Title: DV (X) Delete
Name: MCARTHY, MARINA
Address: 4750 WINKLER AVE EXT
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: JEANNE, STARKEY
Address: 4750 WINKER AVE EXT.
City-St-Zip: FORT MYERS, FL 33912

Title: D (X) Change () Addition
Name: MCCARTHY, MARINA
Address: 4750 WINKER AVE EXT
City-St-Zip: FORT MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: SOALCA, LUIZA
Address: 4750 WINKER AVE EXT
City-St-Zip: FORT MYERS, FL 33912

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIZA SOALCA

DT

05/01/2009

Electronic Signature of Signing Officer or Director

Date