

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000005605

FILED  
Apr 13, 2006  
Secretary of State

Entity Name: TUNSTALL, INC.

**Current Principal Place of Business:**

3300 N PACE BLVD  
#20  
PENSACOLA, FL 32505

**New Principal Place of Business:**

**Current Mailing Address:**

3300 N PACE BLVD  
#20  
PENSACOLA, FL 32505

**New Mailing Address:**

FEI Number: 38-3642154      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TUNSTALL, KIM SUK  
3064 MARCUS POINTE  
PENSACOLA, FL 32505      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: PT ( ) Delete  
Name: TUNSTALL, KUM SUK  
Address: 3064 MARCUS POINTE  
City-St-Zip: PENSACOLA, FL 32505

Title: SV ( ) Delete  
Name: SCHLEIDT, JOHN  
Address: 140 ALABAMA AVE  
City-St-Zip: FORT WALTON BEACH, FL 32548

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: JOHN SCHLEIDT

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04/13/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date