2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P02000074937 SUNDIAL DEVELOPERS, INC. Mailing Address Principal Place of Business 1234 AIRPORT RD., STE. #124 1234 AIRPORT RD., STE. #124 DESTIN, FL 32541 DESTIN, FL 32541 04122006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0892155 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DUNKLE, GERALD R DO NOT WRITE 1234 AIRPORT RD., STE. #124 DESTIN, FL 32541 IN THIS SPACE 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE DUNKLE, GERALD R NAME 1234 AIRPORT RD., STE. #124 STREET ADDRESS 500074152895 05/08/06--01019--018 **75.00 CITY-ST-ZIP DESTIN, FL 32541 VS TITLE HARRISON, JOHN W NAME STREET ADDRESS 1234 AIRPORT RD., STE. #124 500074152895 05/08/06--01019--017 **75.00 CITY-ST-ZIP DESTIN, FL 32541 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gerald R Dunkle 4/16/06

Daytime Phone #