2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90198 045 ***150.00

DOCUMENT # P03000028567

1. Entity Name
HUNTER COMMERCIAL REAL ESTATE CORP.

Principal Place of Business	Mailing Address
~~3911 E. COLONIAL DRIVE~~ ORLANDO, FL 32803	C/O WHITLEY & COMPANY P.O. BOX 536973 ORLANDO, FL 32853-6973

04302008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #: 4809 E. Colonial Dr	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando Fl	City & State
Zip: 32803 Country: Orange	Zip / Country

4. FEI Number: 03-0511846 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HUNTER, DAVID ~~3911 E COLONIAL DR~~ ORLANDO, FL 32803	Name: David Hunter Street Address (P.O. Box Number is Not Acceptable): 4809 E Colonial Dr City: Orlando FL Zip Code: 32803

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 [signature] 4/29/08
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, 2008 Fee will be $550.00

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

10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HUNTER, DAVID M ~~3911 E. COLONIAL DRIVE~~ ORLANDO, FL 32803	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P David M. Hunter 4809 E Colonial Dr Orlando, Fl 32803	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHAUNA, GINN ~~3911 E. COLONIAL DRIVE~~ ORLANDO, FL 32803	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Shauna, Ginn 4809 E Colonial Dr Orlando, Fl 32803	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: [signature] David Hunter President 4/29/08 321-229-4240
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Ck # 2066
4/29/08