


2005 FOR PROFIT CORPORATION ANNUAL REPORT

9/2/2005-90016-015-\$150.00-\$150.00

FILED

05 SEP 19 PM 12: 29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000085037			
1. Entity Name DUNE WALKOVER, INC.			
Principal Place of Business 18 OCEAN DUNE CIRCLE PALM COAST, FL 32137-2266		Mailing Address 18 OCEAN DUNE CIRCLE PALM COAST, FL 32137-2266	
2. Principal Place of Business <i>25 Ocean Dune Circle</i>		3. Mailing Address <i>25 Ocean Dune Circle</i>	
Suits, Apt. #, etc.		Suits, Apt. #, etc.	
City & State <i>Palm Coast FL</i>		City & State <i>Palm Coast, FL</i>	
Zip <i>32137</i>		Country <i>Flagler</i>	
6. Name and Address of Current Registered Agent ROSENBAUM, STAN 18 OCEAN DUNE CIRCLE PALM COAST, FL 32137-2266		7. Name and Address of New Registered Agent Name <i>Rosenbaum, Stan</i> Street Address (P.O. Box Number is Not Acceptable) <i>25 Ocean Dune Circle</i> City <i>Palm Coast</i> FL Zip Code <i>32137</i>	
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: <i>Stan Rosenbaum</i> <i>Stan Rosenbaum</i> DATE: <i>8/26/05</i>		8. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSENBAUM, STAN 18 OCEAN DUNE CIRCLE PALM COAST, FL 321372266 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <i>Rosenbaum, Stan</i> <i>25 Ocean Dune Circle</i> <i>Palm Coast, FL 32137</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSENBAUM, JOANN 18 OCEAN DUNE CIRCLE PALM COAST, FL 321372266 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <i>Rosenbaum, JoAnn</i> <i>25 Ocean Dune Circle</i> <i>Palm Coast, FL 32137</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>8/9/19</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Stan Rosenbaum</i>		Date: <i>8/26/05</i> Daytime Phone #: <i>386-569-1811</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			