2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 29, 2008 8:00 am **DOCUMENT # P07000072466 Secretary of State** 01-29-2008 90024 048 ***150 00 BUNCE ENTERPRISES, INC. Principal Place of Business Mailing Address **6321 PORTER ROAD** 6321 PORTER ROAD 4001501. **STE 10** STE 10 SARASOTA, FL 34240 US SARASOTA, FL 34240 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 2555 PORTER LAKE DRIVE 2555 PORTER LAKE ORIVE Suite, Apt. #, etc. Suite Ant #. etc. CR2E034 (12/06) 01172008 Chg-P SUITE 102 SUITE 102 Applied For City & State City & State 4. FEI Number SARASOTA SARASOTA Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired USA 34240 USA FL 34240 FL Fee Required 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BUNCE, BEVERLEY BUNCE, BEVERLEY Street Address (P.O. Box Number is Not Acceptable) 2555 PORTER LAKE DRIVE 6321 PORTER ROAD **STE 10** SARASOTA, FL 34240 SUITE 102 Zip Code 34240 City SARASOTA 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. B. Bunce Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Defete TITLE BUNCE, BEVERLEY BUNCE, BEVERLEY NAME 2555 PORTER LAKE DRIVE, SUITE 102 STREET ADDRESS 6321 PORTER ROAD, STE 10 STREET ADDRESS SARASOTA, FL 34240 SARASOTA, FL 34240 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITLE BUNCE, PAUL A BUNCE, PAUL A NAME NAME 2555 PORTER LAKE DRIVE, SUITE 102 6321 PORTER ROAD, STE 10 STREET ADDRESS STREET ADDRESS SARASOTA, FL 34240 CITY-ST-ZIP SARASOTA, FL 34240 CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Change ■ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ■ Addition DDLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY- ST- 21F 12. I hereby certify that the information supplied with this filling 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. 80/ FI/ 10 BEVERLEY BUNCE B. Bunce

FILED