2008 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 25, 2008 08:00 AN **DOCUMENT # P08656 Secretary of State** 1. Entity Name **DUNHILL INTERNATIONAL LIST CO., INC.** Principal Place of Business Mailing Address 621 NW 53RD ST. 621 NW 53RD ST. STE. 200 STE. 200 BOCA RATON, FL 33487 US BOCA RATON, FL 33487; US 01072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-5671798 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE NEASE, MARIAN P **BUCKINGHAM, DOOLITTLE & BURROUGHS LLP** 2500 N MILITARY TRAIL SUITE 480 IN THIS SPACE BOCA RATON, FL 33431 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, 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 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS PTD TITLE NAME DUNHILL, ROBERT 11272 WESTLAND CIR STREET ADDRESS CITY-ST-71P BOYNTON BEACH, FL 33437 TITLE **DUNHILL, CINDY** NAME 6630 VILLA SONRISA DR. #714 STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33433 SD TITLE DUNHILL, JOAN NAME STREET ADDRESS 11272 WESTLAND CIR DO NOT WRITE CITY-ST-ZIP BOYNTON BEACH, FL 33437 IN THIS SPACE TITLE NAME HACHENBURG, CANDY DUNHILL STREET ADDRESS 9593 TAVERNIER DRIVE CITY-ST-ZIP BOCA RATON, FL. 33496 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:

NAME STREET ADDRESS CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

OR 998 7800

Daytime Phone

FILED