2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000010604

Entity Name: BUNCH AND ASSOCIATES, INC

FILED Feb 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3500 REYNOLDS ROAD LAKELAND, FL 33803 US **Current Mailing Address: New Mailing Address:** P.O. BOX 32037 LAKELAND, FL 33802 US FEI Number: 59-3159126 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BUNCH, CYNTHIA L 11680 LAKELAND ACRES DR LAKELAND, FL 33810 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BUNCH, CYNTHIA L Name: Name: 11680 LAKELAND ACRES DR Address: Address: City-St-Zip: LAKELAND, FL City-St-Zip: Title: STD Title: () Delete () Change () Addition Name: BUNCH, JAMES D Name: 11680 LAKELAND ACRES DR Address: Address: LAKELAND, FL City-St-Zip: City-St-Zip: Title: Title: PD () Delete () Change () Addition GOODSON, LEIF Name: Name: 4309 FOREST HILLS DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33810 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition FUNK, CHARLES Name: Name: 1521 AUBURN OAKS CIRCLE Address: Address: City-St-Zip: City-St-Zip: AUBURNDALE, FL 33823 Title: Title: () Delete () Change (X) Addition Name: Name: SERGI, KATHY J Address: Address: 58 COLUMBIA DRIVE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

TAMPA, FL 33606

SIGNATURE: CHARLES A FUNK VP 02/23/2007

City-St-Zip: