SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

**STE 110** 

6821 SOUTHPOINT DR N

JACKSONVILLE FL 32216

PROFIT
CORPORATION
ANNUAL REPORT

Principal Place of Business

6821 SOUTHPOINT DR N

JACKSONVILLE FL 32216

STE 110

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000022776 (6)

DUNN & ASSOCIATES CONSULTING GROUP, INC.

2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For	
21			26				<b>59-3264031</b> Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				S8 75 Additional	
22			27				5. Certificate of Status Desired Fee Required	
City & State			City & State				6. Election Campaign Financing \$5.00 May Be	
23		28					Trust Fund Contribution Added to Fees	
Zip	Country	Z	ip	c	ountry		8. This corporation owes or has paid the current year Intangible	
24	25	29		30			Personal Property Tax due June 30, Yes No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
DUNN, STEPHEN H					81 Name			
6821 SOUTHPOINT DR N					82 Street Address (P.O. Box Number is Not Acceptable)			
STE 110					02	Sileel Au	roless (F.O. Box Number is Not Acceptable)	
JACKSONVILLE FL 32216					83			
					84	City	FL 85 Zip Code	
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered								
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered								
agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.								
SIGNATURE Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
12.	OFFICERS AND				3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D		DELETE		TITLE	·	Change Addition	
NAME	DUNN, STEPHEN H		C DELL'IL	- 1	NAME		Change [_] Robiton	
STREET ADDRESS	6821 SOUTHPOINT DR N #110					ADDRESS		
CITY-ST-ZIP	JAOKSONVILLE FL 32216				CITY-ST-			
TITLE	h		Detres		TITLE	ZIP		
NAME	DUNN, JEFFREY D		L] DELETE		NAME	1	L_i Change   Addition	
	200 W FORSYTH ST #1430							
STREET ADDRESS	JACKSONVILLE FL 32202					ADDRESS		
CITY-ST-ZIP	ONOROGITAILLE LE SEGUE				CITY-ST-	ZIP	·	
TITLE			DELETE		TITLE		Change Addition	
NAME					NAME			
STREET ADDRESS				3.3	STREET	ADDRESS		
CITY-ST-ZIP				_	CITY-ST-	ZIP		
TITLE			L_ DELETE	1	TITLE		Change Addition	
NAME				4.2	NAME	İ		
STREET ADDRESS				4.3	STREET	ADDRESS		
City-St-ZiP				4.4	CITY-ST-	ZIP		
TITLE			DELETE	5.1	TITLE		Change Addition	
NAME				5.2	NAME			
STREET ADDRESS				5.3	STREET	ADDRESS	`	
CITY-ST-ZIP				5.4	CITY-ST-	ZIP		
TITLE			DELETE		TITLE		Change Addition	
NAME				62	NAME		C Shange [_] Addition	

6.3 STREET ADDRESS

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

**FILED** 

Aug 19 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/21/1994