FILE NOW FILING FEE AFTER MAY 1 IS $550.00

P95000018889

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000018889

1. Corporation Name
DUNSON ROAD CORP.

Principal Place of Business — Mailing Address

2. Principal Place of Business	2a. Mailing Address
21 200 S. ORANGE AVE.	26
Suite, Apt. #, etc. 22 1900	Suite, Apt. #, etc. 27
City & State 23 ORLANDO FL	City & State 28
Zip 24 32801 — Country 25	Zip 29 — Country 30

3. Date Incorporated or Qualified — 3a. Date of Last Report

4. FEI Number 59-3303145 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Called no and left message file an amendment →

10. Name and Address of New Registered Agent

81 Name: LOUIS R. SEYBOLD
82 Street Address (P.O. Box Number is Not Acceptable)
83 200 S. ORANGE AVE. SUITE 1900
84 City: ORLANDO FL 85 Zip Code: 32801

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: LOUIS R. SEYBOLD — 9-29-97

12. OFFICERS AND DIRECTORS — 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(Six blocks each: TITLE, NAME, STREET ADDRESS, CITY, ST, ZIP ☐ DELETE / ☐ Change ☐ Addition)

Corporate address change only.

A. Alan 10/13/97

CR2E034 (9/96)

14. I do 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.

SIGNATURE: [signature] — 9-29-97 — 407-294-6000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

LOUIS R. SEYBOLD