

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000080334 (2)

1. Corporation Name

WELL DUNN, INC.



Principal Place of Business

Mailing Address

4141 SOUTH FLORIDA AVENUE
LAKELAND FL 33813

2105 GROVEGLEN LANE NORTH
LAKELAND FL 33813

3. Date Incorporated or Qualified

10/19/1995

3a. Date of Last Report

N/A

2. Principal Place of Business:

2a. Mailing Address

21

Suite, Apt. #, etc.

26

4141 South Florida Ave.

27

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

LAKELAND, FL.

29

Zip

Country

24

9. Name and Address of Current Registered Agent

HARDIN, BENJAMIN W JR
3001 US HWY 98 SOUTH
LAKELAND FL

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

85

Zip Code

10. Name and Address of New Registered Agent

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: BENJAMIN W. HARDIN, JR.

Signature typed or printed name of registered agent and if not applicable

(NOTE: Registered Agent Signature required when revisiting)

Date

12. OFFICERS AND DIRECTORS

TITLE PD
NAME DUNN, DAVID A
STREET ADDRESS 1009 OAKHILL ST
CITY-ST-ZIP LAKELAND FL 33801

DELETE

TITLE D
NAME DUNN, ROY B
STREET ADDRESS 216 BAUCOM PARK DR
CITY-ST-ZIP GREER SC 29650

DELETE

TITLE D
NAME OERTEL, JOSEPH M
STREET ADDRESS 2105 GROVEGLEN LANE N
CITY-ST-ZIP LAKELAND FL 33813

DELETE

TITLE VTSD
NAME OERTEL, KATHY M
STREET ADDRESS 2105 GROVEGLEN LANE N
CITY-ST-ZIP LAKELAND FL 33813

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

David A. Dunn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/5/96 (941) 619-8503
Date Date of Filing

CR2E034 (3/96)