2007 FOR PROFIT CORPORATION

Apr 16, 2007 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P9600003161 1. Entity Name 04-16-2007 90055 038 ***150 00 BINGO TIME OF DUNEDIN, INC. Principal Place of Business Mailing Address C/O H. HERSEM C/O T. HERSEM y v v : 1421 COURT STR, B 1421 COURT STR, B CLEARWATER, FL 34616 CLEARWATER, FL 34616 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 31 ISLAND WAY 2676 BAYSHORE BLYD Suite, Apt. #, etc. # 1102 Suite, Apt. #, etc. 03192007 Chg-P CR2E034 (12/06) City & State Applied For City & State 4. FEI Number FL CLEARWATER DUNEDIN 59-3350707 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TERESA WRIGHT HERSEM, THOMAS G (P.O. Box Number is Not Acceptable) 8 RICHARDS AYE 1421 COURT ST., B CLEARWATER, FL 33756 CLEARWATER 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. TERESA WRIGHT and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PSTD** TITLE ☐ Change Addition TITLE Delete HERSEM, THOMAS G NAME NAME 1421 COURT STR, B STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL CITY-ST-ZIP PSTO TITLE VΡ ☐ Delete TITLE ☐ Change ■ Addition WRIGHT, ROBERT NAME NAME 31 ISLAND WAY #1102 CLEARWATER FL 33767 STREET ADDRESS STREET ADDRESS 1300 S. HIGHLAND AVE CITY-ST-ZIP CLEARWATER, FL 33756 CITY - ST - 7IP TITLE ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP TITLE ☐ Defete TITLE ☐ Change ■ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 faceiver 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 the empowered.

ROBERT WRIGHT

SIGNATURES

FILED