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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 21 1998 8:00am Secretary of State

Solo BIROH DRIVE FORT PIERCE FL SH82 2. Principal Place of Evaluates Solo BIROH DRIVE FORT PIERCE FL SH82 2. Principal Place of Evaluates 3. Date Incorporated of Challetes 4. FEI Number 4. FEI Number 5. Sale, April 4. etc. 5. Confirmation of Sales Desired 5. Confirmation of Sales Desired 5. Sale Confirmation of Sales Desired 5. Sales Confirmation of		MENT # P9600 L. DUNN, INC.	0031331 (7)			
South Pierce F1 9492 Principal Place of Euclides 2. Principal Place of Euclides 3. Data Replaced F0 4. FEI Numbers 65.0652966 3. Replaced F0 50.75 State 2. Election Campaign Fnancing 2. Principal Place of Euclides 3. Suite, Aprl. 4, etc. 2. Election Campaign Fnancing 3. Suite, Aprl. 4, etc. 4. FEI Numbers 6. Conflictate of Status Desired 5. Conflictate of Status 5	Principal Plac	e of Business	Mailan Address			
Principal Place of Business 2a, Maining Addross 2b, Maining	,					
2. Principal Place of Business 2a. Multing Address 2b. Multing	FORT PIERCE	E FL 34982				
Applied Flore of Business Suite, April 4, etc. Total Status Dosined					DO NOT WRITE IN TH	IS SPACE
Solto, Apt. 4, etc. 25						
Suite, Apt. 4, etc. 27 County County County App County App County App App County App App App App App App App App App Ap	2. Principal F	Place of Business	2a, Mailing Address			Applied For
City & State City & State City	21				65-0652966	Not Applicable
Total Particular Control Part Country 27 City & State 28 Total Face Country 28 Total Face Country 28 Total Face Country 29 29 30 Country 29 Country 29 Non- and Address of Current Registered Agent 10, Name and Address of New Registered Agent 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address of New Registered Agent 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address (P.O. Box Number is Not Acceptable) 10, Name and Address (P.O. Box Number is Not Accepta			}		5. Certificate of Status Desired	
2 P Country 711 Country 8 Trius Faund Contribution Added to Fees Added to Fees Personal Property and Expendence of Personal Property and Expendence of Personal Property Action Property and Property Added to See Number is Not Acceptable) 9 Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 11, Pursuant to the provisions of Sections 647 (Add and 627 1408; Florida Statutes, 100 above named corporation submits this statement for the purpose of Sections 647 (Add and 627 1408; Florida Statutes, 100 above named corporation submits this statement for the purpose of Registered agent, or both, in the State of Redick, Section 647 6505, Florida Statutes, 100 above named corporation submits this statement for the purpose of Registered agent, or both, in the State of Redick, Section 647 6505, Florida Statutes, 100 above named corporation submits this statement for the purpose of Registered agent, or both, in the State of Redick, Section 647 6505, Florida Statutes, 100 above named corporation submits this statement for the purpose of Registered agent, or both, in the State of Redick, Section 647 6505, Florida Statutes, 100 above named corporation submits this statement for the purpose of Registered agent, or both, in the State of Redick, Section 647 6505, Florida Statutes, 100 above named corporation submits this statement for the purpose of Registered Agent (Registered Agent State Stat	22 City & State					
Zop Country Zop Sol So	23		F 1			
9. Name and Address of Current Registered Agent DUNN, KATHY L 5804 BIRCH DRIVE FORT PIERCE FL 34982 10. Name and Address of Name Registered Agent 11. Name and Address of Name Registered Agent 12. Street Address (P.O. Box Number is Not Acceptable) 13. Pursuant to the provisions of Sections 607 (R602 and 602 11508, floridal Statutes. The abover-remed corporation submits the statement for the purpose of changing its registered agent, or both, in the State of Tieridal Statutes, the abover-remed corporation submits the statement for the purpose of changing its registered agent, an itamise with, and accept the obligations of, Section 607 (R602 and 602 11508, floridal Statutes, the abover-remed corporation submits the statement for the purpose of changing its registered agent. An itamise with, and accept the obligations of, Section 607 (R602, Robid Statutes, the abover-remed corporation submits the statement for the purpose of changing its registered agent. An itamise with, and accept the obligations of, Section 607 (R602, Robid Statutes, the abover-remed corporation submits the statement for the purpose of changing its registered agent. An itamise with, and accept the obligations of, Section 607 (R602, Robid Statutes, the abover-remed corporation submits the statement for the purpose of changing its registered agent		Country		Country		
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DUNN, KATHY L SOA BIRCH DRIVE FORT PIERCE FL 34982 ### SINGEL AGRISS Singel Address (P.O. Box Number is Not Acceptable) Singel Address (P.O. Box Number is Not Acceptable)	 1			1991		
S804 BIRCH DRIVE FORT PIERCE FL 34982 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 65 Zip Code 11. Pursuant to The provisions of Sections (April Applications of Sections of March 1 fooths. Section 607 (1904). Floridal Statistics, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607 (1904). Floridal Statistics 85 SIGNATURE 80 OF LCE IS AND DIRI CHOIS 12. OF LCE IS AND DIRI CHOIS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIREC	DU	NN. KATHY L	· · · · · · · · · · · · · · · · · · ·	81 Name		
FORT PIERCE FL 34982 82 Street Address (F.O. Exist Number is Not Acceptable)	5804 BIRCH DRIVE			00 00	Stone (D.O. Day Marshar C. N	
Pursuant to the previsions (27,00,02 and 607,1509, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent to a floride agent, or hoth, in the State of Floride, Stock change was authorized by the corporation's board of director's Thereby accept the appointment as registered agent alm familiar with, and accept the obligations of, Section 607,0505, Floride Statutes. Signature Symature in a company of a previous agent alm and appointment as registered agent				62 Street Add	otreet Address (P.O. Box Number is Not Acceptable)	
11. Pursuant to the provisions of Sections 607 0x02 and 607 1508, Horida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0x505, Florida Statutes Signature 12.				83		
11. Pursuant to the provisions of Sections 607 0x02 and 607 1508, Horida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0x505, Florida Statutes Signature 12.					· · · · · · · · · · · · · · · · · · ·	
11. Pursuant to the provisions of Sections 607.05.07 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am Jamiliar with, and accept the objections of, Section 607.0505, Florida Statutes. SIGNATURE 20				84 City	F	B5 Zip Code
DUNN, KATHY L						ND DIRECTORS IN 12
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MTY-ST-ZIP 64 CHY-ST-ZIP	STREET ADDRESS			6.3 STREET ADDRESS		
A I hereby certify that the intermedian significant this filling does not enable for the exemption closed in Continued in	CITY - ST - ZIP			6 4 CHY-ST-ZIP	_	

I nereby 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 supplied and according and that my signature shall have the same legal effect as if made under oath, that I am an officer or of irector of the corporation or this receiver or trustee conjourned to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changing in on an alticulment with an address.