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Apr 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000053185 (0)

1. Corporation Name
S & L DUNN, INC.

Principal Place of Business
406 VALENCIA PL CIR
ORLANDO FL 32825

Mailing Address
406 VALENCIA PL CIR
ORLANDO FL 32825-3427

3. Date Incorporated or Qualified
06/17/1996

3a. Date of Last Report

2. Principal Place of Business

21 1760 Mohawk Trail

2a. Mailing Address

26 SURENE

4. FEI Number

59-3387274

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 City & State

Maitland FL

28 City & State

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 Zip

32751

Country

ORANGE

29 Zip

30

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☐ No ☒

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUNN, SEAN J
406 VALENCIA PL CIR
ORLANDO FL 32825

81 Name

DUNN, SEAN J.

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

1760 MOHAWK TR

83

84 City

Maitland

FL

85 Zip Code

32751

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, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE

NAME DUNN, SEAN J
STREET ADDRESS 406 VALENCIA PL CIR
CITY-ST-ZIP ORLANDO FL 32825

TITLE VS ☐ DELETE

NAME DIXON, LAURA A
STREET ADDRESS 406 VALENCIA PL CIR
CITY-ST-ZIP ORLANDO FL 32825

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME DUNN, SEAN J.
1.3 STREET ADDRESS 1760 MOHAWK TR.
1.4 CITY-ST-ZIP Maitland, FL 32751

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME DUNN, LAURA A.
2.3 STREET ADDRESS 1760 MOHAWK TR.
2.4 CITY-ST-ZIP Maitland FL 32751

3.1 TITLE ☒ Change ☒ Addition

3.2 NAME BROWN, MURRAY S.
3.3 STREET ADDRESS 1900 PARK AVE N.
3.4 CITY-ST-ZIP WINTER PARK, FL 32789

4.1 TITLE ☒ Change ☒ Addition

4.2 NAME DAVID ANDRUKIEWICZ
4.3 STREET ADDRESS 1900 PARK AVE. N.
4.4 CITY-ST-ZIP WINTER PARK, FL 32789

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 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. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-97 402 975-9656

CR2E034 (9/96)