

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000066274 (7)

1. Corporation Name
LUNDEEN AND ASSOCIATES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 725 SOUTH U.S. HIGHWAY #1 VERO BEACH FL 32962		Mailing Address 725 SOUTH U.S. HIGHWAY #1 VERO BEACH FL 32962	
2. Principal Place of Business 21 762 S. US 1 Suite, Apt. #, etc.		2a. Mailing Address 26 762 S US 1 Suite, Apt. #, etc.	
22 City & State 23 Vero Beach, FL Zip 24 32962 Country 25 USA		27 City & State 28 Vero Beach, FL Zip 29 32962 Country 30 USA	
3. Date Incorporated or Qualified 08/08/1996		3a. Date of Last Report	
4. FEI Number 59-3400209		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent HENDERSON, STEVE L ESQ 817 BEACHLAND BOULEVARD VERO BEACH FL 32963		10. Name and Address of New Registered Agent	
81 Name			
82 Street Address (P.O. Box Number is Not Acceptable)			
83			
84 City		FL 85 Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME*	LUNDEEN, MICHAEL J	1.2 NAME	
STREET ADDRESS	762 SOUTH U.S. 1	1.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32962	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUNDEEN, ERIKA K	2.2 NAME	
STREET ADDRESS	762 SOUTH U.S. 1	2.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32962	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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; 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 *Erika K. Lundeen* 8-14-97 (501) 770-3110

CR2E034 (4/97)

8-6-97

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To whom it may concern:

upon instructions from the Division of Corporations we are sending a check in the amount of \$165.00 for renewal of our corporation. Lundeen and Associates, Inc. never received its first notice of renewal due to a typographical error in the address in the original filing. This has now been corrected to reflect the correct address. Please call us if you have any further questions at (561) 770-3666.

Sincerely,
Erika K. Lundeen
ERIKA K. Lundeen