2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

May 01, 2007 8:00 am Secretary of State DOCUMENT # P97000109110 05-01-2007 90048 006 ***150.00 HUNTER DEVELOPMENT GROUP, INC. Principal Place of Business Mailing Address C/O WHITLEY & CO. 3911 E COLONIAL DR POB 536973 ORLANDO, FL 32803 ORLANDO, FL 32853-6973 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 04242007 CR2E034 (12/06) Chg-P Applied For City & State 4. FEI Number City & State 59-3488479 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HUNTER, DAVID M Box Number is Not Acceptable) 3333 S ORANGE AVE. ~ LRIVE STF 102 ORLANDO, FL 32806 Zip Code 03 Delando 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. Lam familiar with, and accept the obligations of registered agent. DAVID <u>m. Hu</u>uter SIGNATURE. 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE ☐ Change ■ Addition HUNTER, DAVID NAME NAME STREET ADDRESS 3911 E COLONIAL DR STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32803 CITY-ST-ZIP Delete ■ Addition TITLE TITLE ☐ Change BRANTLY, DEAN L NAME STREET ADDRESS 3911 E COLONIAL DR STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32803 CITY-ST-ZIP Vice President ☐ Delete TITLE ☐ Change **Addition** D'Hasheem Alkebulan NAME NAME 3911 E COLONIAL DRIVE STREET ADORESS STREET ADDRESS Oslando, Fl CITY-ST-7/P CITY+ST-ZIP 32803 GENERAL MANAGER Oelete ☐ Change Addition TITLE TITLE oy Kent E COLONIAL DRIVE STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ■ Addition ☐ Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS City-St-7iP CITY-ST-7IP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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 regerver 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 attachytent with an address, with all other tike empowered.

David M. Hunter 4/24/01

FILED