___ 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 01, 2008 8:00 am Secretary of State **DOCUMENT # P97000109110** 05-01-2008 90198 046 ***150.00 HUNTER DEVELOPMENT GROUP, INC. Principal Place of Business Mailing Address 3911-E COLONIAL-DR C/O WHITLEY & CO. ORLANDO, FL 32803 POB 536973 ORLANDO, FL 32853-6973 3. Mailing Address 2. Principal Place of Business.- No. P.O. Box 4809 E COLONIA Suite, Apt. #, etc. 04302008 CR2E034 (12/06) Chg-P City & State 4. FEI Number Applied For 59-3488479 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired DRAUGE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HUNTER, DAVID M Street Add 3911-EAST-GOLONIAL DR ORLANDO, FL 32803 8. The above named early 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 n SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change TITLE TITLE ■ Addition Delete DAVID HUNTER NAME HUNTER, DAVID NAME 4809 E COLONIAL DR 3911 E COLONIAL DR STREET ADDRESS. STREET ADDRESS ČITY-ST-ZIP ORLANDO FL 32803 CITY-ST-ZIP Delando FI 32803 TITLE Delete TITLE Addition DEAN L. BRANTLY DR. BRANTLY, DEAN L NAME NAME STREET ADDRESS 3911 E COLONIAL DR STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32803 CITY-ST-ZIP AND F1 32803 VΡ TITLE Addition Delete ALKEBULAN D'HASHEEM ALKEBULAN, D'HASHEEM NAME NAME STREET ADDRESS 3011 EAST COLONIAL DR STREET ADDRESS Oklaudo FI 32803 CITY-ST-ZIP ORLANDO, FL 32803 CITY-ST-ZIP TITLE GM TITLE Change Delete ☐ Addition NAME KENT, JOY NAME STREET ADDRESS 3911 EAST COLONIAL DR STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32803 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIT! F Delete TITLE ☐ Change 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 receiver 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 321-229-4240 David Hunter **SIGNATURE**

FILED