2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 18, 2005 08:00 AM Secretary of State DOCUMENT # P98000011653 1. Entity Name KENNETH V. DUNSON, INC. Principal Place of Business Mailing Address 1242 N. ADAMS ST. P.O. BOX 3849 TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32315 LIS 01262005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1566935 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DUNSON, KENNETH V DO NOT WRITE 1242 N. ADAMS ST. TALLAHASSEE, FL 32303 IN THIS SPACE 3. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed by printed name of regions and talle dispersable. (NOTE, Registered Agen) egnature required when reinstaling) FILE NOW!!! FEE IS \$150,00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE P DUNSON, KENNETH V NAME UNDH 00313406 STREET ADDRESS P.O. BOX 3849 34/18/475-80122-021 150.00 CITY-ST-ZIP TALLAHASSEE, FL 32315 TITLE NAME STREET ADDRESS CRY-ST ZP _____ TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY ST- ZP TITLE KAME STREET ADDRESS CITY-ST ZIP 1111.6 NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I turther 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

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