

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000100734

Entity Name: DUNSON CORNER, INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

1750 N. FLORIDA AVE.  
WAUCHULA, FL 33873

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1735  
WAUCHULA, FL 33873

## New Mailing Address:

FEI Number: 65-0879036

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DELOERA, SALVADOR  
110 RAINEY BLVD  
WAUCHULA, FL 33873 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: DE LOERA, JOSE G  
Address: 1525 OLD POLK RD  
City-St-Zip: WAUCHULA, FL 33873

Title: P ( ) Delete  
Name: DE LOERA, SALVADOR  
Address: 110 RAINEY BLVD  
City-St-Zip: WAUCHULA, FL 33873

Title: S ( ) Delete  
Name: HERNANDEZ, MARIA V  
Address: P.O. BOX 1192  
City-St-Zip: BOWLING GREEN, FL 33834

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALVADOR DE LOERA

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date