

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2005 8:00 am
Secretary of State

02-24-2005 90041 048 ***150.00

DOCUMENT # P99000074163						
1. Entity Name GORDON LUNT DEVELOPMENT CONSULTING, INC.						
Principal Place of Business 6305 BIRCH LANE 12741 OAK RUN COURT BOYNTON BEACH, FL 33436 LANTANA, FL 33462			Mailing Address 6305 BIRCH LANE 12741 OAK RUN COURT BOYNTON BEACH, FL 33436 LANTANA, FL 33462			
2. Principal Place of Business			3. Mailing Address			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			
City & State			City & State			
Zip		Country		Zip		
Country		Country		02082005 Chg-P CR2E034 (10/03)		
4. FEI Number 65-0942658				Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent			
LUNT, GORDON A 12741 OAK RUN COURT BOYNTON BEACH, FL 33436			Name Street Address (P.O. Box Number is Not Acceptable) 6305 BIRCH LANE City LANTANA FL Zip Code 33462			
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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE DP	NAME LUNT, GORDON A		<input type="checkbox"/> Delete	TITLE DP	NAME LUNT, GORDON A	
STREET ADDRESS 12741 OAK RUN COURT	CITY-ST-ZIP BOYNTON BEACH, FL 33436		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 6305 BIRCH LANE	CITY-ST-ZIP LANTANA, FL 33462	
TITLE VP	NAME QUESNEL, NICOLE F		<input type="checkbox"/> Delete	TITLE VP	NAME QUESNEL, NICOLE F	
STREET ADDRESS 12741 OAK RUN COURT	CITY-ST-ZIP BOYNTON BEACH, FL 33436		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 6305 BIRCH LANE	CITY-ST-ZIP LANTANA, FL 33462	
TITLE S	NAME JONES, ALYCE M		<input type="checkbox"/> Delete	TITLE S	NAME JONES, ALYCE M	
STREET ADDRESS 3421 N. POWERLINE ROAD, STE. 5	CITY-ST-ZIP POMPANO BEACH, FL 33069		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS 3421 N. POWERLINE ROAD, STE. 5	CITY-ST-ZIP POMPANO BEACH, FL 33069	
TITLE _____	NAME _____		<input type="checkbox"/> Delete	TITLE _____	NAME _____	
STREET ADDRESS _____	CITY-ST-ZIP _____		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS _____	CITY-ST-ZIP _____	
TITLE _____	NAME _____		<input type="checkbox"/> Delete	TITLE _____	NAME _____	
STREET ADDRESS _____	CITY-ST-ZIP _____		<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS _____	CITY-ST-ZIP _____	
12. I 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 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, with all other like empowered.						
SIGNATURE:			2/22/05		561-967-9810	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>	