

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Feb 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S14275** (9)

1. Corporation Name
THE DUNAGAN COMPANY, INC.



Principal Place of Business 320 WILLIAM STREET APT 4 KEY WEST FL 33040 US	Mailing Address P O BOX 1912 APT 4 KEY WEST FL 33041-1912 US
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3. Date Incorporated or Qualified 11/19/1990	3a. Date of Last Report 06/28/1996
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2. Principal Place of Business 21 517 Whitehead Street Suite, Apt. #, etc. 22 City & State 23 Key West, FL Zip 24 33040	2a. Mailing Address 26 P.O. Box 1912 Suite, Apt. #, etc. 27 City & State 28 Key West, FL Zip 29 33040	4. FEI Number 58-1917683 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent CATALFOMO, ANTHONY 517 WHITEHEAD STREET KEY WEST FL 33040	10. Name and Address of New Registered Agent 81 Name Gregory G. Farrelly 82 Street Address (P.O. Box Number is Not Acceptable) Catalfomo & Farrelly 83 517 Whitehead Street 84 City Key West FL 85 Zip Code 33040
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Gregory G. Farrelly* (NOTE: Registered Agent signature required when reinstating) DATE **01/25/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME DUNAGAN, REUBEN V.		1.2 NAME	
STREET ADDRESS 320 WILLIAM STREET, APT 4		1.3 STREET ADDRESS 517 Whitehead Street	
CITY-ST-ZIP KEY WEST FL		1.4 CITY-ST-ZIP Key West, FL 33040	
TITLE ST	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME DUNAGAN, REUBEN V.		2.2 NAME	
STREET ADDRESS 320 WILLIAM ST., APT 4		2.3 STREET ADDRESS 517 Whitehead Street	
CITY-ST-ZIP KEY WEST FL		2.4 CITY-ST-ZIP Key West, FL 33040	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Reuben V. Dunagan* **Reuben V. Dunagan** **President** DATE **01/28/97** (305) 296-5951

CR2E034 (9/96)