FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S39647** **(0)**

1. Corporation Name

KENNETH M. DUNN COMPANY OF FLORIDA, INC.

Principal Place of Business	Mailing Address
460 VILLAGE LANE VERO BCH FL 32963 US	460 VILLAGE LANE VERO BCH FL 32963 US

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip / Country	Zip / Country
24 / 25	29 / 30

3. Date Incorporated or Qualified: **03/18/1991**	3a. Date of Last Report: **03/14/1995**
4. FEI Number: **31-1326174**	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. This corporation has Liability for intangible tax under s. 199.032, Florida Statutes: ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

DUNN, KENNETH M.
460 VILLAGE LANE
VERO BCH FL 32963

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

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 _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE ☐ Change ☐ Addition
NAME	DUNN, KENNETH M		1.2 NAME
STREET ADDRESS	460 VILLAGE LANE		1.3 STREET ADDRESS
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP
TITLE	DVP	☐ DELETE	2.1 TITLE ☐ Change ☐ Addition
NAME	DUNN, CHARLES S		2.2 NAME
STREET ADDRESS	615 FORTHILL DRIVE		2.3 STREET ADDRESS
CITY-ST-ZIP	CHARLESTON WV		2.4 CITY-ST-ZIP
TITLE	DST	☐ DELETE	3.1 TITLE ☐ Change ☐ Addition
NAME	DUNN, RANDALL K		3.2 NAME
STREET ADDRESS	290 WOOD HAVEN PKWY		3.3 STREET ADDRESS
CITY-ST-ZIP	ATHENS GA		3.4 CITY-ST-ZIP
TITLE		☐ DELETE	4.1 TITLE ☐ Change ☐ Addition
NAME			4.2 NAME
STREET ADDRESS			4.3 STREET ADDRESS
CITY-ST-ZIP			4.4 CITY-ST-ZIP
TITLE		☐ DELETE	5.1 TITLE ☐ Change ☐ Addition
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP
TITLE		☐ DELETE	6.1 TITLE ☐ Change ☐ 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 is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: Pres. Dent K.M. Dunn 2/28/96 407231 1734

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

CR2E034 (12/95)