2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S53202

Entity Name: DUNN & DUNN DATA SYSTEMS, INC.

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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1679 SW MACEDO BLVD. 9035 AMERICANA ROAD

PORT ST. LUCIE, FL 34984 US SUITE 16

VERO BEACH, FL 32966 US

Current Mailing Address: New Mailing Address:

1679 SW MACEDO BLVD. 9035 AMERICANA ROAD

PORT ST. LUCIE, FL 34984 US SUITE 16

VERO BEACH, FL 32966 US

FEI Number: 65-0280146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DUNN, SANDRA A. DUNN, PHILIP E

1679 S.W. MACEDO BLVD 9035 AMERICANA ROAD

PORT ST. LUCIE, FL 34984 US SUITE 16

VERO BEACH, FL 32966 US

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: PHILIP E. DUNN 01/05/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: DUNN, SANDRA A. Name: DUNN, PHILIP E

Address: 18706 TRANQUILITY BASE LANE
City-St-Zip: PORT ST. LUCIE, FL 34987

Address: 18706 TRANQUILITY BASE LANE
City-St-Zip: PORT ST. LUCIE, FL 34987

City-St-Zip: PORT ST. LUCIE, FL 34987

Title: S () Delete Title: S (X) Change () Addition

 Name:
 DUNN, PHILIP E.
 Name:
 DUNN, MATTHEW

 Address:
 18706 TRANQUILITY BASE LANE
 Address:
 4205 TROON PLACE

 City-St-Zip:
 PORT ST. LUCIE, FL 34987
 City-St-Zip:
 PORT ST. LUCIE, FL 34953

Title: V () Delete Title: () Change () Addition

 Name:
 DUNN, MICHAEL D
 Name:

 Address:
 4342 SW LAGRANGE ST
 Address:

 City-St-Zip:
 PORT SAINT LUCIE, FL 34953
 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: PHILIP E. DUNN P 01/05/2009