

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# S53202

FILED
Jun 30, 2009
Secretary of State**Entity Name:** DUNN & DUNN DATA SYSTEMS, INC.**Current Principal Place of Business:**9035 AMERICANA ROAD
SUITE 16
VERO BEACH, FL 32966 US**New Principal Place of Business:****Current Mailing Address:**9035 AMERICANA ROAD
SUITE 16
VERO BEACH, FL 32966 US**New Mailing Address:****FEI Number:** 65-0280146**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DUNN, PHILIP E
9035 AMERICANA ROAD
SUITE 16
VERO BEACH, FL 32966 US**Name and Address of New Registered Agent:**DUNN, SANDRA A
9035 AMERICANA ROAD
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: SANDRA A. DUNN

06/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: DUNN, PHILIP E
Address: 18706 TRANQUILITY BASE LANE
City-St-Zip: PORT ST. LUCIE, FL 34987**Title:** S () Delete
Name: DUNN, MATTHEW
Address: 4205 TROON PLACE
City-St-Zip: PORT ST. LUCIE, FL 34953**Title:** V () Delete
Name: DUNN, MICHAEL D
Address: 4342 SW LAGRANGE ST
City-St-Zip: PORT SAINT LUCIE, FL 34953**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: DUNN, SANDRA A
Address: 18706 TRANQUILITY BASE LANE
City-St-Zip: PORT ST. LUCIE, FL 34987**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: SANDRA A. DUNN

P

06/30/2009

Electronic Signature of Signing Officer or Director

Date