


2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**May 19, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # F84179**  
1. Entity Name  
LONGWOOD HILLS DEVELOPMENT, INC.



Principal Place of Business      Mailing Address  
857 DOVER ROAD                      857 DOVER ROAD  
MAITLAND, FL 32751 US              MAITLAND, FL 32751 US

**DO NOT WRITE IN THIS SPACE**



05132005      No Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
59-2158839              Not Applicable

5. Certificate of Status Desired            \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
WOLK, STEVEN J PD  
857 DOVER ROAD  
MAITLAND, FL 32751

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	VSD
NAME	WOLK, HELEN J VSD
STREET ADDRESS	857 DOVER ROAD
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	PD
NAME	WOLK, STEVEN J PD
STREET ADDRESS	857 DOVER RD
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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05/19/05-80004-002 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 persons empowered.

SIGNATURE:       **MAY 14 2005** (407) 339-2933  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #