


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 857 DOVER ROAD MAITLAND, FL 32751 US	Mailing Address 857 DOVER ROAD MAITLAND, FL 32751 US
--	--

**DO NOT WRITE IN THIS SPACE**



05132005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2158839	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOLK, STEVEN J PD  
857 DOVER ROAD  
MAITLAND, FL 32751

**DO NOT WRITE IN THIS SPACE**

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

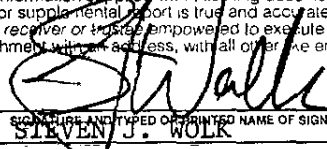
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

U00000367632  
05/19/05-80004-002 150.00

**DO NOT WRITE IN THIS SPACE**

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 #

STEVEN J. WOLK