## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000004683

Address:

City-St-Zip:

81 EDGEWOOD TERR

SANTA ROSA BEACH, FL

Entity Name: ODAAT DEVELOPING COMPANY, INC

FILED Apr 18, 2009 Secretary of State

y	e. OB/VII BE	1 V L L O 1 11 V O O O I V II 7	((V), ((V))			
Current P	rincipal Place o	of Business:	New	New Principal Place of Business:		
	E HERON DR DSA BCH, FL 32	2459 US				
Current M	lailing Address	:	New	Mailing Addre	ss:	
	E HERON DR DSA BCH, FL 32	2459 US				
FEI Number:	: 35-1931821	FEI Number Applied Fe	or ( ) FEI Number No	ot Applicable ( )	Certificate of Status Desired	I()
Name and	Address of Cu	rrent Registered A	gent: Name	e and Address	of New Registered Agent:	
289 WHITI	ANN, RICHARD E HERON DRIVE DSA BEACH, FL	E				
	named entity su e of Florida.	bmits this statement	for the purpose of chan	ging its register	ed office or registered agent, c	or both,
SIGNATUR	RE:					
	Electronic	Signature of Regist	ered Agent		Date	
Election Car	npaign Financing 1	Trust Fund Contribution	ı (  ).			
OFFICERS AND DIRECTORS:			ADD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ST () D SCHAUMANN, RIG 289 WHITE HERG SANTA ROSA BEA	ON DR	Title: Name: Addres City-Si		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () D SCHAUMANN, RIG 74 EDGEWOOD SANTA ROSA BEA	TERR.	Title: Name: Addres City-Si	s: 79 EDGE\	(X) Change ( ) Addition NNN, RICHARD P II WOOD TERR. DSA BEACH, FL 32459	
Title: Name: Address: City-St-Zip:	P () D SCHAUMANN, KA 289 WHITE HERC SANTA ROSA BE	ON DR	Title: Name: Addres City-Si		( ) Change ( ) Addition	
Title: Name:	D () D SCHAUMANN, DA	elete NIEL S	Title: Name:	D SCHAUMA	(X) Change()Addition NN, DANIEL S	

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.

Address:

City-St-Zip:

84 EDGEWOOD TERR

SANTA ROSA BEACH, FL

SIGNATURE: KATHY R. SCHAUMANN PRES 04/18/2009