

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 13, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # J94852**

1. Entity Name  
**MINTON WOODS DEVELOPMENT CORPORATION**



Principal Place of Business      Mailing Address

3115 DIXIE HWY NE      3115 DIXIE HWY NE  
 PALM BAY, FL 32905 US      PALM BAY, FL 32905 US

**DO NOT WRITE IN THIS SPACE**



02172004      No Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
**59-2857780**      Not Applicable

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

6. Name and Address of Current Registered Agent

**PENCE, ROY**  
**3115 DIXIE HWY NE**  
**PALM BAY, FL 32905**

**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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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

U00000111538  
 04/13/04-80023-005 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEACE, ROY J 3115 DIXIE HWY NE PALM BAY, FL 32905
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PENCE, HERSCHEL 3115 DIXIE HWY NE PALM BAY, FL
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 thereof; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_ **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

4/9/04      (321) 735-6107  
 Date      Daytime Phone #