2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 01, 2006 8:00 am
Secretary of State
05-01-2006 90445 018 ***150.00

DOCUMENT # L19986

1. Entity Name

M.L. CARTER DEVELOPMENT CORPORATION

Principal Place of Business	Mailing Address
3333 S ORANGE AVE STE 200 ORLANDO FL 32806-8500 US	P.O. BOX 568821 ORLANDO FL 32856-8821 US

1st MOORE CR2E034 (10/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2977457 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CARTER, MAURY L.
3333 S ORANGE AVE
STE 200
ORLANDO FL 32806-8500

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee Will Be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVAT POITRAS, JAMES W. 3100 SPRINGHEAD CT SAINT CLOUD FL 34771	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT POITRAS, PATRICIA T. 3100 SPRINGHEAD CT SAINT CLOUD FL 34771	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP POITRAS, EDWARD W 27 LK HAMILTON BCH HAINES CITY FL 33844	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP POITRAS, KAY G 27 LK HAMILTON BCH HAINES CITY FL 33844	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPAT CARTER, MAURY L. 3333 S ORANGE AVE STE 200 ORLANDO FL 32806-8500	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DAVP CARTER, DARYL M. 3333 S ORANGE AVE STE 200 ORLANDO FL 32806-8500	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 like empowered.

SIGNATURE: X Daryl M Carter Apr 20 06 407/422-3144
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 600313094
#L19986

Additional Sheet Page 2 of 2

FOR PROFIT CORPORATION ANNUAL REPORT

2006

M L CARTER DEVELOPMENT CORPORATION

Note: The following officers were omitted from the 2006 AR:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11:

Description	Information	Status
TITLE	S	Addition
NAME	Wray, Pamela L.	
ADDRESS	3333 S Orange Ave, Suite 200	
CITY-ST-ZIP	Orlando FL 32806-8500	

Description	Information	Status
TITLE	AT	Addition
NAME	Robert H Charron, CPA	
ADDRESS	1400 Computer Dr	
CITY-ST-ZIP	Westborough MA 01581	