• 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 31, 2008 08:00 AN Secretary of State

DOCUMENT # P0300003429 Entity Name MARC-MICHAELS DEVELOPMENT CO., INC.		Secretary of S
OH 1.75 MADEL LOT		
nncipal Place of Business (192 ACT PD 197 TO Mailing Address to 199 TO	0 55,	THE COLUMN
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DO NOT WRITE IN THIS CO	ACE	01082008 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SP	ACE	4. FEI Number Applied For 51-0444549 Not Applicable
		5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
MW, INC.		DO NOT WRITE
90 N. ORANGE AVE UITE 15000	·	IN THIS SPACE
RLANDO, FL 32801		IN THIS SPACE
The above named entity submits this statement for the purpose of changing its reg	istered office or registe	red agent, or both, in the State of Florida. I am familiar with, and accep
the obligations of registered agent.	•	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Re-	gistered Agent signature required	d when reinstating) DATE
FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS		.00 May Be ded to Fees
English Members Service Service Continue		
ABBOTT, MICHAEL HET ADDRESS 720 W. MORSE BLVD.	*· , ·	
v-si-ziP WINTER PARK, FL 32789	_	Hooppenson (o)
THEE, S. MARC		000000808481 102/06/08-80044-010 150.00
Y-S1-ZIP WINTER PARK, FL 32789	i	
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r-sr-zip	_	
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EEI ADDRESS V-ST-ZIP		
E		
ME REET ADDRESS	1	
Y-ST-ZIP I. I hereby certify that the information supplied with this filling does not qualify for the	e exemptions contained	d in Chapter 119. Florida Statutes. I further certify that the information
. I hereby certify that the information supplied with this filing does not qualify for the indicated on this report or supplied entail report in true and accurate and that my sof the corporation of the receiver of trustee employees to execute this report as the proof of the corporation of the receiver of trustee employees to execute this report as	signature shall have the required by Chapter 60	same legal effect as if made under oath; that I am an officer or director 77, Florida Statutes; and that my name appears in Block 10 or Block 11 if
crianged, or on an attachment with an address; with all other like empowered.	0)	
IGNATURE: SIGNATURE AND PIPES OR PRINTED NAME OF SIGNING OFFICER OR	DIRECTOR	Date Dayline Proce #