


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 24, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P05000091697

1. Entity Name  
**D & D DEVELOPMENT AND INVESTMENTS CORPORATION**



Principal Place of Business      Mailing Address

4 PEBBLE COURT      4 PEBBLE COURT  
 CRAWFORDVILLE, FL 32327 US      CRAWFORDVILLE, FL 32327 US

**DO NOT WRITE IN THIS SPACE**



07192007      No Chg-P      CR2E034 (11/05)

4. FEI Number      Applied For  
 20-3072223      Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301

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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 \_\_\_\_\_ DATE 07/24/07-80004-002 150.00

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**  
**Due by September 14, 2007**

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	D
NAME	SPITZER, DAVID
STREET ADDRESS	4 PEBBLE COURT
CITY-ST-ZIP	CRAWFORDVILLE, FL 32327
TITLE	D
NAME	PAVLOVICH, DALE
STREET ADDRESS	4 PEBBLE COURT
CITY-ST-ZIP	CRAWFORDVILLE, FL 32327
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 lines empowered.

SIGNATURE: David Spitzer      **DAVID SPITZER**      7/19/07      229-227-7262

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #