2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007 08:00 AM
Secretary of State

				_	0	10000	town of Ctot
DOCUMENT # P98000088501				<u> </u>	۵	ecre	tary of Stat
1. Entity Name JEFFREY HOLDEN DEVELOPMENT, INC.							
JEFFREY	HOLDEN DEVELOPMENT,	NC.		9			
			100	_			
Principal Place	e of Business	Mailing Address					
	UCKY AVENUE	121 N. KENTUCKY AVENUE					
LAKELAND, F	L 33801	LAKELAND, FL 33801				==:=:	
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DO NOT WRITE IN THIS SPACE			^=	01092007	No Chg-P	CR2E0	34 (11/05)
			CE	4. FEI Numb 59-353			Applied For Not Applicable
							\$8.75 Additional
l				5. Certificate	of Status Desired		Fee Required
	6. Name and Address of Current Re	istered Agent	_				
HOLDEN, JEFFREY K				DO	NOT W	DITE	=
121 N. KENTUCKY AVENUE							
LAKELAND, FL 33801				IN .	THIS SF	PACE	
							Ţ
9. The above	named entity submits this statement for th	o purpose of changing its register	rod office or roais	stored agent, or be	orb. in the State of Ele	orida Lami	amiliar with and accept
	ions of registered agent.	a brithosa or cuanding its radioter	red office of regis	sterett agent, or be	An, in the State of Fic	Jilda. Fallti	MITTING WILL, GIRL BOOOD!
SIGNATURE_							
				ured when reinstating)		DATE	
	E NOW!!! PEE 10 \$450.00	9. Election Campaign Fina	ncina \$	5.00 May Be			
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Trust Fund Contribution.		dded to Fees			i
10.	OFFICERS AND DIF	ECTORS	1		<u></u>		
TITLE	D						
NAME OXDEST +DDDSSSS	HOLDEN, JEFFREY K						
STREET ADDRESS CITY-ST-ZIP	121 N. KENTUCKY AVENUE LAKELAND, FL 33801		l .				
TITLE			~[1
NAME			1		U00	000067:	3322 325-008 150.00
STREET ADDRESS			ľ		U3/29/	/07-80	325-808 150.Q
CITY-ST-ZIP			_{_				ľ
TITLE							
NAME STREET ADDRESS			1			a Barre II sultan in	
CITY-ST-ZIP				DO	NOT W	KIII	
TITLE		· · · · · · · · · · · · · · · · · · ·	1	INI '	THIS SE		
NAME				114		AOL	•
STREET ADDRESS							
CITY-ST-ZIP	ļ		9				

12. Thereby certify that the information supplied with this filling 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 the anti-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 trusted 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 order of the properties.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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