2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000029796

1. Entity Name

NOTES DEVELOPMENT CORP.



Principal Place of Business 2915 SQUIRE OAK CT ST CLOUD, FL 34769 Mailing Address 285 REIDER AVENUE LONGWOOD, FL 32750

FILED Jan 30, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01272004	No Chg-P	CR2E034 (10/03)	

4. FEI Number			Applied For
59-3567497			Not Applicable
5. Certificate of Status Desired		\$8.75	Additional

6. Name and Address of Current Registered Agent

LEVASSEUR, LORI M CPA 285 REIDER AVENUE LONGWOOD, FL 32750

DO NOT WRITE IN THIS SPACE

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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_	Signature, typed or printed name of registered agent and title	rlappicable. (NOTE, Registered	Agenr signature	e required when re histating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing 🗆	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS			······································		
TULE NAME STREET ADDRESS CITY-ST-ZIP	D LEVASSEUR, LORI 285 REIDER AVENUE LONGWOOD, FL 32750				000000022446 01/30/04-80045-005 150.00		
THEF NAME STREET ADDRESS CITY-ST-ZIP							
HILE NAME STREET ADDRESS CITY+ST-ZIP				DO	NOT WRITE		
TITLE MAME STREET ADDRESS DITY-ST-ZIP				IN .	THIS SPACE		
T-TLE NAME STREET ADDRESS GHY-ST-ZIP	•						
TATULE NAME STREET ADDRESS CITY-ST-ZIP							
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 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 attaching it with an address, with #J other like empowered.							