


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Mar 08, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P98000101116**  
 1. Entity Name  
 MINORCAN DEVELOPMENT, INC.



Principal Place of Business: 45120 DORMAN PLACE, CALLAHAN, FL 32011  
 Mailing Address: 45120 DORMAN PLACE, CALLAHAN, FL 32011

**DO NOT WRITE IN THIS SPACE**



02262005 No Chg-P CR2E034 (10/03)  
 4. FEI Number: 59-3547110 Applied For: Not Applicable  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 MIZELL, JEAN H  
 45120 DORMAN PLACE  
 CALLAHAN, FL 32011

**DO NOT WRITE IN THIS SPACE**

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00**  
 9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MIZELL, JEAN H
STREET ADDRESS	45120 DORMAN PLACE
CITY-ST-ZIP	CALLAHAN, FL 32011
TITLE	V
NAME	MIZELL, WALKER D
STREET ADDRESS	45120 DORMAN PLACE
CITY-ST-ZIP	CALLAHAN, FL 32011
TITLE	D
NAME	MIZELL, CLYDE J
STREET ADDRESS	P.O. DRAWER 5011
CITY-ST-ZIP	CALLAHAN, FL 32011
TITLE	D
NAME	MIZELL, LARRY S
STREET ADDRESS	45543 HODGES RD.
CITY-ST-ZIP	CALLAHAN, FL 32011
TITLE	D
NAME	MIZELL, MICHAEL D
STREET ADDRESS	45298 HODGES RD.
CITY-ST-ZIP	CALLAHAN, FL 32011
TITLE	D
NAME	MIZELL, WALTER S
STREET ADDRESS	45200 DORMAN PLACE
CITY-ST-ZIP	CALLAHAN, FL 32011

**DO NOT WRITE IN THIS SPACE**

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 03/08/05-80019-022 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Jean H. Mizell DATE: 3-07-05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #