

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H57651

FILED
Apr 16, 2006
Secretary of State

Entity Name: MAXFIELD DEVELOPMENTS, INC.

Current Principal Place of Business:

C/O ROBERT E. WOODARD
PO BOX 670
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

C/O ROBERT E. WOODARD
PO BOX 670
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 59-2534979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODARD, ROBERT E
60 NORTH FOREST STREET
WINDERMERE, FL 347860670 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HEIDRICH, PAUL JR.
Address: 1950 MIZEL AVE
City-St-Zip: WINTER PARK, FL 32792 US

Title: VD () Delete
Name: HILAL, TALAL E
Address: 160 NORTH SPRING LAKE DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: TCD () Delete
Name: WOODARD, ROBERT E
Address: 60 NORTH FOREST STREET
City-St-Zip: WINDERMERE, FL 347860670 US

Title: SD () Delete
Name: JORGENSEN, PHILIP D
Address: 128 PARSON ROAD
City-St-Zip: LONGWOOD, FL 32779 US

Title: D () Delete
Name: OWENS, PAUL D
Address: 1312 W. WASHINGTON STREET
City-St-Zip: ORLANDO, FL 32805 US

Title: D () Delete
Name: PRICE, ALAN
Address: 921 JUANITA ROAD
City-St-Zip: WINTER PARK, FL 32789 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT E. WOODARD

TCD

04/16/2006

Electronic Signature of Signing Officer or Director

_____ Date