

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L19986

Entity Name: M.L. CARTER DEVELOPMENT CORPORATION**Current Principal Place of Business:**3333 S ORANGE AVE
STE 200
ORLANDO, FL 32806-8500**Current Mailing Address:**P.O. BOX 568821
ORLANDO, FL 32856-8821 US**FEI Number:** 59-2977457**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARTER, DARYL M
3333 S ORANGE AVE
STE 200
ORLANDO, FL 32806-8500 US*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

Officer/Director Detail :

Title	PATD
Name	CARTER, MAURY L
Address	3333 S. ORANGE AVENUE, SUITE 200

City-State-Zip: ORLANDO FL 32806-8500

Title	VATD
Name	POITRAS, JAMES W
Address	3333 S. ORANGE AVENUE, SUITE 200

City-State-Zip: ORLANDO FL 32806-8500

Title	VD
Name	POITRAS, EDWARD W
Address	3333 S ORANGE AVE STE 200

City-State-Zip: ORLANDO FL 32806-8500

Title	VATD
Name	CARTER, DARYL M
Address	3333 S. ORANGE AVENUE, SUITE 200

City-State-Zip: ORLANDO FL 32806-8500

Title	TD
Name	POITRAS, PATRICIA T
Address	3333 S. ORANGE AVENUE, SUITE 200

City-State-Zip: ORLANDO FL 32806-8500

Title	VD
Name	POITRAS, KAY G
Address	3333 S ORANGE AVE STE 200

City-State-Zip: ORLANDO FL 32806-8500

I hereby 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 all other like empowered.

SIGNATURE: DARYL M. CARTER

VICE PRESIDENT

04/13/2016

Electronic Signature of Signing Officer/Director Detail

Date