2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #252283

1. Entity Name

PALM BEACH DEVELOPMENT CORP



FILED Mar 10, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

505 SOUTH FLAGLER DRIVE

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SUITE 1300 WEST PALM BEACH, FL 33401 **SUITE 1300** WEST PALM BEACH, FL 33401



No Chg-P

CR2E034 (11/05)

4. FEI Number 59-0991123

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

LASSITER, WILLIAM G. JR. 505 SOUTH FLAGLER DRIVE **SUITE 1300**

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	named entity submits this statement for the plants of registered agent.	urpose of changing its registere	ed office or registered agent, or bo	th, in the State of Florida. I am fam	iliar with, and accept				
SIGNATURE	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registered	d Agent signature required when reinstating)	DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.	scing \$5.00 May Be Added to Fees	U00000853355 03/26/08-80066-011	150.00				
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT P LASSITER, WILLIAM G. JR 505 S FLAGLER DR#1300 WEST PALM BCH, FL 33401	TORS		attellefel (d. 18) er et flefen i Staftfal. En fordat i Margalet flefen eftere en Margalet i Margalet flefen flefen en skri Margalet flefen i Margalet flefen flefen flefen.					
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12. I hereby certify that the information supplied with this filing 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 true and accurate and that my signature shall have the same legal effect as if made under on 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP