

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 379709

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Entity Name:** WYNNE DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

12804 SW 122 AVENUE  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

8000 SOUTH US #1  
SUITE 402  
PORT ST. LUCIE, FL 34952 US

**New Mailing Address:**

**FEI Number:** 59-1349652      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WYNNE, MATTHEW L  
8000 SOUTH US 1, #402  
PORT ST LUCIE, FL 34952 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WYNNE, JOEL  
Address: 8000 SOUTH US 1, SUITE 402  
City-St-Zip: PT ST LUCIE, FL 34952

Title: VD  
Name: WYNNE, MATTHEW L  
Address: 8000 SOUTH US 1, STE #402  
City-St-Zip: PORT ST LUCIE, FL

Title: VSD  
Name: WYNNE, ERIC P  
Address: 8000 SOUTH US 1, STE #402  
City-St-Zip: PORT ST LUCIE, FL 34952

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: JOEL WYNNE

PD

03/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date