

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 450551

FILED  
Jul 24, 2002  
Secretary of State

Entity Name: MALLARD DEVELOPMENT CORPORATION

## Current Principal Place of Business:

3521 JACQUE LEE LANE  
LAKELAND, FL 33803 US

## New Principal Place of Business:

11350 KO DRIVE  
LAKELAND, FL 33809 US

## Current Mailing Address:

3521 JACQUE LEE LANE  
P. O. BOX 1326  
EATON PARK, FL 33840 US

## New Mailing Address:

PO BOX 1326  
EATON PARK, FL 33840 US

FEI Number: 59-1614646

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CROFT, SANDRA K  
3521 JACQUE LEE LANE  
LAKELAND, FL 33803 US

## Name and Address of New Registered Agent:

TOWNSON, LEIDY B  
COUNTRY LANE NE, 11 ST.  
APT. 705  
WINTER HAVEN, FL 33881 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: LEIDY B. TOWNSON

07/24/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VPT ( ) Delete  
Name: TOWNSON, DAVID M.,  
Address: 2395 HAMILTON PARK LANE  
City-St-Zip: BUFORD, GA 30519

Title: P ( ) Delete  
Name: TOWNSON, RONNIE N  
Address: 100 COUNTRY LANE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: D ( ) Delete  
Name: TOWNSON, RONNIE N  
Address: 100 COUNTRY LANE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: S ( ) Delete  
Name: TOWNSON, LEIDY B  
Address: 100 COUNTRY LANE  
City-St-Zip: WINTER HAVEN, FL 33880

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: TOWNSON, RONNIE N  
Address: 100 COUNTRY LANE  
City-St-Zip: WINTER HAVEN, FL 33880

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 Section 119.07(3)(i), 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: LEIDY B. TOWNSON

S

07/24/2002

Electronic Signature of Signing Officer or Director

Date