## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 597305** 

Name:

Address:

City-St-Zip:

PRINE, BARBARA

PO BOX 5027 N/A

SARASOTA, FL 34277

FILED Apr 30, 2006 Secretary of State

Entity Nar	ne: TREBOR	DEVELOPMENT CORPORATI	ON		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
315 58TH ST, SUITE E BRADENTON BEACH, FL 34217			315 58TH ST, SUITE HOLMES BEACH, FL	315 58TH ST, SUITE E HOLMES BEACH, FL 34217	
Current M	ailing Addres	s:	New Mailing Addres	New Mailing Address:	
P.O. BOX: SARASOT	5027 A, FL 34277	US			
FEI Number:	: 59-1878285	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
KROKROSKIA, JULIE 315 58TH ST STE I HOLMES BEACH, FL 34217 US			315 58TH ST STE E		
	named entity s e of Florida.	submits this statement for the pu	rpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				04/30/2006	
	Electron	ic Signature of Registered Ager	nt	Date	
Election Car	npaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PDST () PRINE, ROBER P.O. BOX 5027 SARASOTA, FL	, N/A	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PRINE, ROBER 6910 22ND ST	WEST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title <sup>.</sup>	V ()	Delete	Title <sup>.</sup>	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT E PRINE **PRES** 04/30/2006