2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 685835

1. Entity Name
PAUL MARTIN DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
18205 RIVER OAKS DR	P.O. BOX 1189
JUPITER, FL 33458 US	JUPITER, FL 33468 US

DO NOT WRITE IN THIS SPACE

01122008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-2610927	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GLAFENHEIN, PAUL, JR.
18205 RIVER OAKS DR
JUPITER, FL 33458

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2008 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000904416 05/01/08-80012-001 150.00

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	GLAFENHEIN, PAUL JR
STREET ADDRESS	P.O. BOX 1189
CITY-ST-ZIP	JUPITER, FL 33468

TITLE	VST
NAME	GLAFENHEIN, CAROL
STREET ADDRESS	P.O. BOX 1189
CITY-ST-ZIP	JUPITER, FL 33468

TITLE	M
NAME	GLAFENHEIN, BRAD
STREET ADDRESS	P.O. BOX 1189
CITY-ST-ZIP	JUPITER, FL 33468

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 3/11/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #