

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 690376

FILED
Mar 26, 2009
Secretary of State

Entity Name: ALTAMONTE DEVELOPMENT CORPORATION

Current Principal Place of Business:

2925 WEST STATE 434
SUITE 111
LONGWOOD, FL 32779 US

New Principal Place of Business:

301 BRANTLEY CLUB PL
LONGWOOD, FL 32779 US

Current Mailing Address:

2925 WEST STATE 434
SUITE 111
LONGWOOD, FL 32779 US

New Mailing Address:

301 BRANTLEY CLUB PL
LONGWOOD, FL 32779 US

FEI Number: 59-2115071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOODMAN, BARRY S.
2925 WEST STATE RD 434
SUITE 111
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

GOODMAN, BARRY S.
301 BRANTLEY CLUB PL
LONGWOOD, FL 32779 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:

03/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOODMAN, BARRY S.
Address: 2925 WEST STATE RD 434 SUITE 111
City-St-Zip: LONGWOOD, FL 32779

Title: V (X) Delete
Name: FREEDMAN, JEROME B
Address: 2925 WEST STATE RD 434 SUITE 111
City-St-Zip: LONGWOOD, FL 32779

Title: T () Delete
Name: KNOWLES, LISA A
Address: 2925 WEST STATE RD 434 SUITE 111
City-St-Zip: LONGWOOD, FL 32779

Title: S (X) Delete
Name: HUGHEY, JOANNE
Address: 2925 WEST STATERD 434 SUITE 111
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOODMAN, BARRY S
Address: 301 BRANTLEY CLUB PL
City-St-Zip: LONGWOOD, FL 32779

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

Title: TS (X) Change () Addition
Name: KNOWLES, LISA A
Address: 301 BRANTLEY CLUB PL
City-St-Zip: LONGWOOD, FL 32779

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

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: BARRY S. GOODMAN

PRES

03/26/2009

Electronic Signature of Signing Officer or Director

Date