

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002125

FILED  
Feb 10, 2005  
Secretary of State

Entity Name: MEDALLIST DEVELOPMENTS INC.

## Current Principal Place of Business:

1070 E. INDIANTOWN ROAD  
SUITE 208  
JUPITER, FL 33477 US

## New Principal Place of Business:

## Current Mailing Address:

1070 E. INDIANTOWN ROAD  
SUITE 208  
JUPITER, FL 33477 US

## New Mailing Address:

FEI Number: 65-0906439

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALSH, BIEH  
1070 E. INDIANTOWN ROAD  
SUITE 208  
JUPITER, FL 33477 US

## Name and Address of New Registered Agent:

WALSH, BRETT  
1070 E. INDIANTOWN ROAD  
SUITE 208  
JUPITER, FL 33477 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: BRETT WALSH

02/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FEHON, ANTHONY P  
Address: L 14, ONE MARTIN PLACE  
City-St-Zip: SYDNEY, NS 2000 AU

Title: V ( ) Delete  
Name: SEABRIDGE, JEREMY  
Address: 1070 E. INDIANTOWN RD, SUITE 208  
City-St-Zip: JUPITER, FL 33477 US

Title: V ( ) Delete  
Name: WEED, FRANK  
Address: 1070 E. INDIANTOWN ROAD  
City-St-Zip: JUPITER, FL 33477 US

Title: S ( ) Delete  
Name: WALSH, BRETT  
Address: 1070 E. INDIANTOWN ROAD  
City-St-Zip: JUPITER, FL 33477 US

Title: D ( ) Delete  
Name: MOSS, WILLIAM J  
Address: LEVEL 14, ONE MARTIN PLACE  
City-St-Zip: SYDNEY, NS 2000 AU

Title: D ( ) Delete  
Name: SHEPPARD, WALLACE R  
Address: LEVEL 14, ONE MARTIN PLACE  
City-St-Zip: SYDNEY, NS 2000 AU

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: WEED, FRANK

V

02/10/2005

Electronic Signature of Signing Officer or Director

Date