

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001464

Entity Name: MERLIN DEVELOPMENT, INC.

FILED  
Jun 29, 2005  
Secretary of State

## Current Principal Place of Business:

181 CHESHIRE LANE #500  
PLYMOUTH, MN 554415465

## New Principal Place of Business:

181 CHESHIRE LANE  
SUITE 500  
PLYMOUTH, MN 554415465

## Current Mailing Address:

181 CHESHIRE LANE #500  
PLYMOUTH, MN 554415465

## New Mailing Address:

181 CHESHIRE LANE  
SUITE 500  
PLYMOUTH, MN 554415465

FEI Number: 41-1640918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SKARRA, LESLIE L  
1424 SW 48TH TERRACE  
CAPE CORAL, FL 33914 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCTD ( ) Delete  
Name: SKARRA, LESLIE L  
Address: 1424 SW 48TH TERRACE  
City-St-Zip: CAPE CORAL, FL

Title: S ( ) Delete  
Name: CARLSON, SUE  
Address: 181 CHESHIRE LANE, #500  
City-St-Zip: PLYMOUTH, MN

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCTD (X) Change ( ) Addition  
Name: SKARRA, LESLIE L  
Address: 1424 SW 48TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33914 US

Title: S (X) Change ( ) Addition  
Name: CARLSON, SUZANNE  
Address: 181 CHESHIRE LANE, #500  
City-St-Zip: PLYMOUTH, MN 55441 US

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: SUZANNE CARLSON

S

06/29/2005

Electronic Signature of Signing Officer or Director

Date