


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 08, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F05000004579</b> 1. Entity Name COURTS DEVELOPMENT-ALTAMONTE, INC.	
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Principal Place of Business 1930 STONEGATE DRIVE BIRMINGHAM, AL 35242	Mailing Address 1930 STONEGATE DRIVE BIRMINGHAM, AL 35242
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**DO NOT WRITE IN THIS SPACE**

RECEIVED BY REGISTERED AGENT  
02212007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2229515	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

PANICO, JAMES P ESQ  
111 S. MAITLAND AVENUE, SUITE 100  
MAITLAND, FL 32751

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IN THIS SPACE**

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U000000659286 03/16/07-80024-007 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSC BAREFIELD, J FRANK JR 1930 STONEGATE DRIVE BIRMINGHAM, AL 35242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CICCARELLO, JOE JR 5527 THEALL ROAD HOUSTON, TX 77066
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEERSINK, MARNIX E 2800 ROSS CLARK CIRCLE SQ DOTHAN, AL 35301
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: FRANK BAREFIELD Date: 2/21/07 Daytime Phone #: 205 397 2289  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR