

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 12, 2008 08:00 AM
Secretary of State

DOCUMENT # F05000004579

1. Entity Name
COURTS DEVELOPMENT-ALTAMONTE, INC.



Principal Place of Business
1930 STONEGATE DRIVE
BIRMINGHAM, AL 35242

Mailing Address
1930 STONEGATE DRIVE
BIRMINGHAM, AL 35242



02052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2229515

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
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

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

U000000825378
02/21/08-80008-003 150.00

10. OFFICERS AND DIRECTORS

TITLE	PSC
NAME	BAREFIELD, J FRANK JR
STREET ADDRESS	1930 STONEGATE DRIVE
CITY-ST-ZIP	BIRMINGHAM, AL 35242
TITLE	VD
NAME	CICCARELLO, JOE JR
STREET ADDRESS	5527 THEALL ROAD
CITY-ST-ZIP	HOUSTON, TX 77066
TITLE	D
NAME	HEERSINK, MARNIX E
STREET ADDRESS	2800 ROSS CLARK CIRCLE SQ
CITY-ST-ZIP	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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #