## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000004722

Entity Name: BELK DEVELOPMENT COMPANY, INC.

FILED Jul 29, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 26619 PERDIDO BEACH BLVD. 8635 MCMILLAN ROAD SUITE D CITRONELLE, AL 36522 ORANGE BEACH, AL 36561 **New Mailing Address: Current Mailing Address:** POST OFFICE BOX 1511 8635 MCMILLAN ROAD ORANGE BEACH, AL 36561 CITRONELLE, AL 36522 FEI Number: 72-1361330 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARDAY, JACKIE A 1597 WOODLAWN WAY GULF BREEZE, FL 32563 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition BELK, JUDY M BELK, JUDY M Name: Name: 26619 PERDIDO BEACH BLVD. #D 8635 MCMILLAN ROAD Address: Address: City-St-Zip: ORANGE BEACH, AL 36561 City-St-Zip: CITRONELLE, AL 36522 Title: Title: () Delete () Change () Addition Name: MCCAIN, WESLEY TODD Name: 19690 NORTH THIRD STREET Address: Address: CITRONELLE, AL 36522 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition MCCAIN, WESLEY TODD Name: Name: 19690 NORTH THIRD STREET Address: Address: City-St-Zip: CITRONELLE, AL 36522 City-St-Zip: Title: STD () Delete Title: STD (X) Change ( ) Addition BELK, CHARLES S BELK, CHARLES S Name: Name: Address: 26619 PERDIDO BEACH BLVD. #D Address: 8635 MCMILLAN ROAD City-St-Zip: ORANGE BEACH, AL 36561 City-St-Zip: CITRONELLE, AL 36522

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: JUDY M BELK PRES 07/29/2007