2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001234

Entity Name: GDC GRAND BAHAMA DEVELOPMENT, LIMITED - CORP.

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
31 LUPI COURT ATTN: LEGAL DEPARTMENT PALM COAST, FL 32137 US				215 CELEBRATION PLACE 200		
				CELEBRATION, FL 34747 US		
Current Mailing Address:				New Mailing Address:		
31 LUPI COURT ATTN: LEGAL DEPARTMENT PALM COAST, FL 32137 US			1 HAMMOCK BEACH PARKWAY SECOND FLOOR PALM COAST, FL 32137 US			
FEI Number:	98-0487043	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable () C	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
DEMARTIN, CHARLES P 31 LUPI COURT ATTN: LEGAL DEPARTMENT PALM COAST, FL 32137 US				DEMARTIN, CHARLES P 1 HAMMOCK BEACH PARKWAY SECOND FLOOR PALM COAST, FL 32137 US		
in the State		ibmits this statement for the pu	ırpose o	t changing it	s registerea οπι	ce or registered agent, or both,
SIGNATURE:				05/01/2009		
	Electronic	Signature of Registered Ager	nt			Date
Election Carr		2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive t	•		O OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	GINN, EDWARD	ATTN: LEGAL DEPT.		Title: Name: Address: City-St-Zip:	GINN, EDWARD F	CH PARKWAY, SECOND FLOOR
Title: Name: Address: City-St-Zip:	ADLER, DEAN S	Delete EET, THE CIRCA CENTRE PA 19104		Title: Name: Address: City-St-Zip:	KLUMPH, JOHN P	N PLACE, SUITE 200
Title: Name: Address: City-St-Zip:	LUBERT, IRA M	Delete EET, THE CIRCA CENTRE PA 19104		Title: Name: Address: City-St-Zip:	JONES, ALTON E	N PLACE, SUITE 200
Title: Name: Address: City-St-Zip:	MASTERS, ROB	ATTN: LEGAL DEPT.		Title: Name: Address: City-St-Zip:	WARNER, BRIAN	N PLACE, SUITE 200
Title: Name: Address: City-St-Zip:	GRAY, JOHN	Delete CIAL CENTRE BLDG SUITE 12 AND BAHAMA,		Title: Name: Address: City-St-Zip:	HANSON, PAUL	hange()Addition ON PLACE, SUITE 200 L 34747 US
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	TURNBULL-HUTC	N PLACE, SUITE 200

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: EDWARD R. GINN III P 05/01/2009