

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90094 030 ***158.75

DOCUMENT # F80458

1. Entity Name

A & W DEVELOPMENT, INC.



Principal Place of Business

12091 CRYSTAL CONDO RD
FT MYERS FL 33912

Mailing Address

12091 CRYSTAL CONDO RD
FT MYERS FL 33912



2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

3. Mailing Address

8733 MANDERSTON CT

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

FT. MYERS, FL

4. FEI Number

59-2235818

Applied For

Not Applicable

Zip

Country

Zip

33912

Country

LEE

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HILL, ALLEN L
12091 CRYSTAL CONDO ROAD
FORT MYERS FL 33912

7. Name and Address of New Registered Agent

Name ALLEN L HILL

Street Address (P.O. Box Number is Not Acceptable)

8733 MANDERSTON CT

City FT. MYERS

FL

Zip Code 33912

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

Allen L. Hill

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1-29-07

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	HILL, ALLEN L	
STREET ADDRESS	12091 CRYSTAL CONDO ROAD	
CITY - ST - ZIP	FORT MYERS FL 33912	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PURVIS, JUDITH R	
STREET ADDRESS	12091 CRYSTAL CONDO ROAD	
CITY - ST - ZIP	FORT MYERS FL 33912	
TITLE	S	<input type="checkbox"/> Delete
NAME	HILL, WILLIAM H	
STREET ADDRESS	12091 CRYSTAL CONDO ROAD	
CITY - ST - ZIP	FORT MYERS FL 33912	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Judith R. Purvis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-07

Date

(235)
275-7070

Daytime Phone #