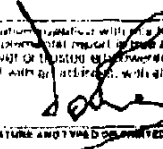


FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90035 023 ***150.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # F98000001270			
1. Entity Name BRITANNICA DEVELOPMENT LIMITED, INC.			
2. Principal Place of Business WESTAL GREEN LAWN LANDSDOWN RD CHELTENHAM GLOS. GL502JA, UK		3. Mailing Address % ROSALIND A. CARR, PA 999 NINTH ST. STE 205 NAPLES, FL 34102-8203	
4. Principal Place of Business State: UK	5. Mailing Address State: FL	6. FFI Number 69-3484363	
7. City, State City: London	8. City, State City: Naples	9. Certificate of Status Received ☐ \$8.75 Additional Fee Required	
10. Name and Address of Current Registered Agent CARR, LYNN 999 NINTH STREET SOUTH STE 205 NAPLES, FL 34402		11. Name and Address of New Registered Agent Name: _____ Street Address (P.O. Box Number is Not Acceptable): _____ City: FL	
12. The undersigned hereby certifies this statement for the purpose of changing its registered office or registered agent, as both, in the State of Florida. I am familiar with, and accept the responsibility of registered agent.			
13. FEE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		14. Election Campaign Financing Full Fund Contribution ☐ \$5.00 May Be Added to Fees	
15. OFFICERS AND DIRECTORS		16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
15a. NAME 15b. STREET ADDRESS 15c. CITY, STATE	15d. ☐ Delete PCO O'BRIEN, DANIEL LANDSDOWN RD. CHELTENHAM GLOS. GL502JA, UK	16a. NAME 16b. STREET ADDRESS 16c. CITY, STATE	16d. ☐ Change ☐ Add New
15a. NAME 15b. STREET ADDRESS 15c. CITY, STATE	15d. ☐ Delete VR O'BRIEN AGNES LANDSDOWN RD. CHELTENHAM GLOS. GL502JA, UK	16a. NAME 16b. STREET ADDRESS 16c. CITY, STATE	16d. ☐ Change ☐ Add New
15a. NAME 15b. STREET ADDRESS 15c. CITY, STATE	15d. ☐ Delete	16a. NAME 16b. STREET ADDRESS 16c. CITY, STATE	16d. ☐ Change ☐ Add New
15a. NAME 15b. STREET ADDRESS 15c. CITY, STATE	15d. ☐ Delete	16a. NAME 16b. STREET ADDRESS 16c. CITY, STATE	16d. ☐ Change ☐ Add New
15a. NAME 15b. STREET ADDRESS 15c. CITY, STATE	15d. ☐ Delete	16a. NAME 16b. STREET ADDRESS 16c. CITY, STATE	16d. ☐ Change ☐ Add New
15a. NAME 15b. STREET ADDRESS 15c. CITY, STATE	15d. ☐ Delete	16a. NAME 16b. STREET ADDRESS 16c. CITY, STATE	16d. ☐ Change ☐ Add New
18. I hereby certify that the information supplied with this filing does not qualify for the exemption under Section 605, Florida Statutes. I further certify that this information 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 person or persons authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Item 10 or Item 11 of this report.			
SIGNATURE: 		DATE: 4-5-2005	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

20027994



03312005 Chg-P CR2E034 (10/03)