



**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 22, 2006 08:**  
**Secretary of St**

<b>DOCUMENT # F98000001270</b>			
1. Entity Name <b>BRITANNICA DEVELOPMENT LIMITED, INC.</b>			
Principal Place of Business <b>WESTAL GREEN LAWN LANDSDOWN RD CHELTENHAM GLOS. GL502JA, UK</b>		Mailing Address <b>% ROSALIND A. CARR, PA 999 NINTH ST. -STE 205 NAPLES, FL 34102-8200</b>	
<b>DO NOT WRITE IN THIS SPACE</b>			
		 03162006 No Chg-P CR2E034 (11/05)	
		4. FEI Number <b>59-3494363</b>	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Name and Address of Current Registered Agent  <b>CARR, LYNN 999 NINTH STREET SOUTH STE 205 NAPLES, FL 34402</b>		<b>DO NOT WRITE IN THIS SPACE</b>	
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 <u><i>LYNN CARR</i></u> (NOTE: Registered Agent signature required when renewing) DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees  UN0000477168 04/06/06-80041-013 150.00
10. OFFICERS AND DIRECTORS		<b>DO NOT WRITE IN THIS SPACE</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD O'BRIEN, DANIEL LANDSDOWN RD. CHELTENHAM GLOS., GL502JA, UK		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS O'BRIEN, AGNES LANDSDOWN RD. CHELTENHAM GLOS., GL502JA, UK		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE 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 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: <u><i>[Signature]</i></u> <u><i>J. K. KOTZ</i></u> <u><i>16th MARCH 2006</i></u> <u><i>239-261-1910</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			