2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001398

Entity Name: FENSTONE DEVELOPMENTS LIMITED COMPANY

FILED Jan 14, 2009 Secretary of State

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|---|----------------------------------|--|--|--|--|
| Current P | rincipal Place | e of Business: | New Principal Place | New Principal Place of Business: | |
| 1105 N FEDERAL HWY BOYNTON BEACH, FL 33435 | | | 1005 LAKE AVENUE | | |
| | | | #301 LAKE WORTH, FL 33 | 3460 | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| SUITE 155 | INOLE TRAIL 5 FTESVILLE, V | A 22901 | | | |
| FEI Number | : 65-0734078 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| MORICK, SANDI 1105 N FEDERAL HWY BOYNTON BEACH, FL 33435 US | | | MORICK, SANDI 1005 LAKE AVENUE #301 LAKE WORTH, FL 33 | 1005 LAKE AVENUE | |
| | e named entity e of Florida. | submits this statement for the p | ourpose of changing its registere | d office or registered agent, or both, | |
| SIGNATURE: | | | | 01/14/2009 | |
| | Electro | nic Signature of Registered Ag | ent | Date | |
| Election Ca | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR | |
| Title: Name: Address: City-St-Zip: | BINNIGTON, A | E ST, ST. HELIER, JERSEY | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | BISSON, SANI | E ST, ST. HELIER, JERSEY | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | HEMPSTER, S | E ST, ST. HELIER, JERSEY | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | MOURANT & C |) Delete O. SECRET, ARIES LIMITED E, ST. HELIER, JERSEY ANDS, UK, | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: | D (|) Delete | Title: | () Change () Addition | |

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.

Name:

Address:

City-St-Zip:

SIGNATURE: KIMBERLY GOODYEAR DIR 01/14/2009

GOODYEAR, KIMBERLY A

1180 SEMINOLE TRAIL, STE 155

CHARLOTTESVILLE, VA 22901

Name:

Address:

City-St-Zip: