

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G60970

Entity Name: SABER DEVELOPMENT, INC.

FILED
Feb 25, 2009
Secretary of State

Current Principal Place of Business:

40 N.W. LINCOLN DRIVE
FORT WALTON BEACH, FL 32547 US

New Principal Place of Business:

40 N.W. LINCOLN DRIVE
FORT WALTON BEACH, FL 325473015 US

Current Mailing Address:

P.O. BOX 1075
FORT WALTON BEACH, FL 32549 US

New Mailing Address:

P.O. BOX 1075
FORT WALTON BEACH, FL 325491075 US

FEI Number: 59-2325674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, STEPHEN M
715 FOREST SHORES DRIVE
MARY ESTHER, FL 32569 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILLIAMS, STEPHEN M
Address: 715 FOREST SHORES DRIVE
City-St-Zip: MARY ESTHER, FL 32569

Title: S () Delete
Name: WILLIAMS, OMA B
Address: 229 ALCONSE AVENUE SE UNIT E
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: T () Delete
Name: WILLIAMS, MICHAEL C
Address: 554 CORAL CT UNIT 206
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: CEO () Delete
Name: WILLIAMS, JOHN S
Address: 229 ALCONSE AVE SE UNIT E
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: V () Delete
Name: WILLIAMS, MATTHEW W
Address: 43 RUE ST. TOPEZ
City-St-Zip: MIRAMAR BEACH, FL 32550

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: WILLIAMS, MATTHEW W
Address: 43 RUE SAINT TROPEZ
City-St-Zip: MIRAMAR BEACH, FL 32550

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: JOHN S. WILLIAMS

CEO

02/25/2009

Electronic Signature of Signing Officer or Director

Date