

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G60970

FILED
Feb 09, 2010
Secretary of State

Entity Name: SABER DEVELOPMENT, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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:

WILLIAMS, STEPHEN M
2631 STORMY CIRCLE
NAVARRE, FL 32566 US

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:

02/09/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: WILLIAMS, STEPHEN M
Address: 2631 STORMY CIRCLE
City-St-Zip: NAVARRE, FL 32566 US

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

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

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

Title: V
Name: WILLIAMS, MATTHEW W
Address: 874 VENUS COURT UNIT 204
City-St-Zip: FORT WALTON BEACH, FL 32548 US

I hereby 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 all other like empowered.

SIGNATURE: JOHN S. WILLIAMS

CEO

02/09/2010

Electronic Signature of Signing Officer or Director

Date