2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H15394



FILED									
Mar 24, 2008 8:00 am									
Secretary of State									
02 04 0000 0000 001 ***700 75									

03-24-2008 90230 001 ***793 75

1. Entity Name SMR-1 DEVELOPMENT CORPORATION							05-24-200	0 70230 0	01 /2	73.13
Principal Place 14400 COVE BRADENTON,	NANT WAY		Mailing Address 14400 COVENANT WAY BRADENTON, FL 34202		LIBERRY BIRL	4863	II BIBN BIBN 21611	815 11 817 11 8181	(PSS 17 18 S)	
2. Principal Pi	lace of Busin	ess - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.		03102008	Chg-P	CR2E03	4 (12/06)		
City & State			City & State			4. FEI Numbe 59-2470			——————————————————————————————————————	plied For t Applicable
Zip		Country	Zip	Country		5. Certificate of	of Status Desired		8.75 Add	itional
	6. Name	and Address of Current	Registered Agent			7. Name and	Address of New F	Registered Ac	ent	
CHIOFALO, ANTHONY J 14400 COVENANT WAY BRADENTON, FL 34202					Name Street Address (P.O. Box Number is Not Acceptable)					
					City			FL	Zip Code	•
FILI	E NOW!!!	FEE IS \$150.00 8 Fee will be \$550.	9. Election Campai	ign Financin	9 _ \$5	5.00 May Be		DATE		
10.	***	OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	FICERS AND I	DIRECTORS	SIN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	BRADEN [*] VST		☐ Delete	TITLE NAME STREET AI CITY-SI- TITLE	DDRESS ZIP	RKA DA 400'COL 4KEWO		· WAY CH, P		Addition Addition
STREET ADDRESS CITY-ST-ZIP	14400 CC	O, ANTHONY 3. EVENANT WAY TON, FL 34202		NAME STREET A CITY-ST-						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					DDRESS Zip				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARTIN, TIM 14400 COVENANT WAY			TITLE NAME STREET A CITY-ST-	I				□ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P			TITLE NAME STREET A CITY-ST-	I .				☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	partify that th	o information cumulical with	☐ Delete It this filling does not qualify fo	TITLE NAME STREET AI CITY-ST-	ZIP	ad in Charter 110	Elovida Statuta		Change	Addition

indicated on this report or supplemental report is true and accurate and that my signature shall have the same logal effect as if made under eath; 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: