



2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # H68690 1. Entity Name WATERFORD DEVELOPMENT CORPORATION						FILED 05 SEP -7 PM 9: 57 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 301 N PINE MEADOW DRIVE DEBARY, FL 32713 US				Mailing Address 301 N PINE MEADOW DRIVE DEBARY, FL 32713 US			
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
CROCKER, TED J 301 N PINE MEADOW DR SUITE B DEBARY, FL 32713				Name Breedlove, Caryn - D. Street Address (P.O. Box Number is Not Acceptable) 301 N. Pine Meadow Suite B City Debary FL Zip Code 32713			
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>Caryn D Breedlove, President</u> 8-16-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BREEDLOVE, BRIAN W DP 330 E. SUMMIT SAN ANTONIO, TX 78121 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director, President and Assistant Secretary Breedlove, Caryn D. D/P/S 602 E. Mandalay San Antonio, TX 78212 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS BREEDLOVE, CARYN D VP/SC 602 EAST MANDALAY SAN ANTONIO, TX 78212 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S Breedlove, Brian W 330 E. Summit San Antonio, TX 78212 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BIFERIE, ROBERT L D 6108 TURTLE MOUND NEW SMYRNA BEACH, FL 32169 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	200059782812 09/20/05--01046--013 **61.25 <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Caryn D Breedlove, President <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				8-16-05 (210)725-1001 <small>Date Daytime Phone #</small>			