

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# H68690

**FILED**  
**Jul 24, 2006**  
**Secretary of State****Entity Name:** WATERFORD DEVELOPMENT CORPORATION**Current Principal Place of Business:**301 N PINE MEADOW DRIVE  
DEBARY, FL 32713 US**New Principal Place of Business:**1800 PEMBROOK DRIVE  
SUITE 260  
ORLANDO, FL 32810 US**Current Mailing Address:**301 N PINE MEADOW DRIVE  
DEBARY, FL 32713 US**New Mailing Address:**1800 PEMBROOK DRIVE  
SUITE 260  
ORLANDO, FL 32810 US**FEI Number:** 59-2559321**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BREEDLOVE, CARYN D  
301 N PINE MEADOW DR  
SUITE B  
DEBARY, FL 32713 US**Name and Address of New Registered Agent:**BREEDLOVE, CARYN D  
1800 PEMBROOK DRIVE  
SUITE 260  
ORLANDO, FL 32810 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:

07/24/2006

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:**

Title: DPS ( ) Delete  
Name: BREEDLOVE, CARYN D  
Address: 602 E. MANDALAY  
City-St-Zip: SAN ANTONIO, TX 78212

Title: S (X) Delete  
Name: BREEDLOVE, BRIAN W  
Address: 330 E. SUMMIT  
City-St-Zip: SAN ANTONIO, TX 78212

Title: D (X) Delete  
Name: BIFERIE, ROBERT L D  
Address: 6108 TURTLE MOUND  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP ( ) Delete  
Name: WARD, WENDI  
Address: 708 PALENCI CT  
City-St-Zip: WINTER SPRINGS, FL 32708

**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: DVPS (X) Change ( ) Addition  
Name: WARD, WENDI  
Address: 708 PALENCI CT  
City-St-Zip: WINTER SPRINGS, FL 32708

I hereby certify that the information supplied with this filing does not qualify for the 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: CARYN D BREEDLOVE

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07/24/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date