2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 27, 2005 08:00 AM Secretary of State DOCUMENT # J36307 FOUR D DEVELOPMENT, INC. Principal Place of Business Mailing Address PO BOX 1641 913 NEWBERGER ROAD LUTZ, FL 33549 US LUTZ, FL 33549 US المحكون والمحكون والمح No Chg-P CR2E034 (10/03) 01292005 Applied For 4. FEI Number 59-2880959 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE WORLEY, DAVID J. 913 NEWBERGER ROAD LUTZ, FL 33549 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent argnature required when retristating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. PTS TITLE NAME WORLEY, DAVID J. STREET ADDRESS 913 NEWBERGER ROAD LUTZ, FL 33549 CITY~ST-ZIP DV 000000335463 TITLE WORLEY, DAVID J. NAME STREET ADDRESS 913 NEWBERGER ROAD LUTZ, FL 33549 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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.

David J. Worky

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

813-944-5875

Daytime Phone #

22 April 2005