

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J71323

FILED
Mar 30, 2009
Secretary of State

Entity Name: SPCDC DEVELOPMENTS, INC.

Current Principal Place of Business:

227 SECOND AVENUE NORTH
ST PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 54
ST PETERSBURG, FL 33731 US

New Mailing Address:

227 SECOND AVENUE NORTH
ST PETERSBURG, FL 33701 US

FEI Number: 59-2810483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ATTY. JOSEPH A. DIVITO
4514 CENTRAL AVE.
ST. PETERSBURG, FL 33711 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BAILEY, PAUL,
Address: 924 NORTH SHORE DR. NE
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: PD () Delete
Name: REUSS, RONALD L
Address: 227 SECOND AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: D () Delete
Name: ELLIOTT, LEANN,
Address: P.O. BOX 13489
City-St-Zip: ST. PETERSBURG, FL 33731

Title: D () Delete
Name: UNLEY, DENISE G
Address: 5801 49TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: VD () Delete
Name: NEWSOME, LARRY,
Address: 6798 CROSSWINDS DR SUITE A-101
City-St-Zip: SAINT PETERSBURG, FL 33710

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RONALD L. REUSS

PD

03/30/2009

Electronic Signature of Signing Officer or Director

_____ Date