


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90414 045 ***150.00

DOCUMENT # K45010 1. Entity Name CONDEV CORPORATION					
Principal Place of Business 157 E NEW ENGLAND AVE STE 301 WINTER PARK, FL 32789			Mailing Address ROBERT N. GARDNER P.O. BOX 1748 WINTER PARK, FL 32790		
2. Principal Place of Business - No P.O. Box # 400 W. Morse Blvd		3. Mailing Address Suite, Apt. #, etc. Suite 101			
City & State Winter Park, FL		City & State Winter Park, FL		4. FEI Number 59-1236289	
Zip 32789		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GARDNER, ROBERT N 157 E NEW ENGLAND AVE STE 301 WINTER PARK, FL 32789				7. Name and Address of New Registered Agent Name Robert N. Gardner Street Address (P.O. Box Number is Not Acceptable) 400 W. Morse Blvd. Suite 101 City Winter Park FL 32789	
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 _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		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	V GARDNER, ROBERT N 157 E NEW ENGLAND AVE, STE 301 WINTER PARK, FL 32789	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400 W. Morse Blvd, Ste 101 Winter Park, FL 32789	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARDNER, JOSEPH J 157 E NEW ENGLAND AVE, STE 301 WINTER PARK, FL 32789	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400 W. Morse Blvd, Ste 101 Winter Park, FL 32789	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTS GARDNER, ANDREW M 2479 ALOMA AVE WINTER PARK, FL 32792	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400 W. Morse Blvd, Ste 101 Winter Park, FL 32789	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAS GARDNER, CHRISTOPHER 2479 ALOMA AVE WINTER PARK, FL 32792	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400 W. Morse Blvd, Ste 101 Winter Park, FL 32789	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARDNER, ROBERT M 157 E NEW ENGLAND AVE, STE 301 WINTER PARK, FL 32789	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400 W. Morse Blvd, Ste 101 Winter Park, FL 32789	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURROW, JULIE G 1011 TEMPLE GROVE WINTER PARK, FL 32789	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400 W. Morse Blvd, Ste 101 Winter Park, FL 32789	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Andrew Gardner <i>Robert N. Gardner</i> 4/19/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					