2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K45010

Entity Name: CONDEV CORPORATION

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
400 W. MORSE BLVD STE 101 WINTER PARK, FL 32789					
Current Mailing Address: New Mailing Address:					
% ROBERT N. GARDNER P.O. BOX 1748 WINTER PARK, FL 32790					
FEI Number:	59-1236289	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
GARDNER, ROBERT N 400 W. MORSE BLVD. STE 101 WINTER PARK, FL 32789 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:					
Electronic Signature of Registered Agent Date					
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	V () I GARDNER, ROB 400 W. MORSE WINTER PARK,	BLVD, STE 101	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () I GARDNER, JOS 400 W. MORSE WINTER PARK,	BLVD, STE 101	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPTS () I GARDNER, AND 400 W. MORSE WINTER PARK,	BLVD, STE 101	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPAS () I GARDNER, CHR 400 W. MORSE WINTER PARK,	BLVD, STE 101	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) GARDNER, ROB 400 W. MORSE WINTER PARK,	BLVD, STE 101	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) BURROW, JULIE 1011 TEMPLE G WINTER PARK,	ROVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
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: ANDREW GARDNER VPTS 04/24/2009