2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2008 8:00 am Secretary of State 04-30-2008 90186 020 ***150.00

1. Entity Name DANIEL DEVELOPMENT, INC.											
Principal Pla 601 LONGB #1101 SARASOTA,		s	Mailing Address 601 LONGBOAT RD #1101 SARASOTA, FL 34228								
2. Principal		ness - No P.O. Box # N. Tamiami Trail	3. Mailing Address 1301 N. Tamiami Trail								
Suite, Apt. #, etc. 614 City & State			Suite, Apt. #, etc. 614 City & State			04162008	Chg-P	CR2E03	<u> </u>		
Sarasota, FL			Sarasota, FL			4. FEI Numb	•		·	oplied For ot Applicable	
Zip	34236	Country	^{Zip} 34236	Country		5. Certificate	e of Status Desired		8.75 Add ee Require		
	6. Name	and Address of Current		7. Name and Address of New Registered Agent Name							
GREGORIA, RIC 200 SOUTH ORANGE AVENU SARASOTA, FL 34236					Street Address (P.O. Box Number is Not Acceptable)						
					City			FL	Zip Cod	e	
The above named entity submits this statement for the purpose of changing its registered						ered agent, or bo	oth, in the State of Flo		niliar with,	and accept	
the obligations of registered agent. SIGNATURE											
Signature, typed or printed name of registived agent and title if applicable. INOTE: Registered Agent signature required when reinstating) DATE Output Date											
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.						5.00 May Be ded to Fees					
10.	Lon	OFFICERS AND I				ADDITIONS	CHANGES TO OFF				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DANIEL, GERARD 601 LONGBOAT CLUB #1101 LONGBOAT KEY, FL			HITLE NAME STREET AD CITY-ST-2	ODRESS 1301	PD Stange Gerard Daniel 1301 N. Tamiami Trail; Apt #614 Sarasota, FL 34236				Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAM Stre			TITLE NAME STREET AD CTTY-ST-2	DRESS 410	T .				⊠ Addition	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	NAMI			TITLE NAME STREET AD CITY-ST-Z	DRESS 2944	kalph Daniel				X Addition	
NAME STREET ADDRESS CITY-ST-ZIP			☐ Detete	TITLE NAME STREET AD CITY-ST-Z	1			ſ] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AD CITY-S1-2					☐ Change	Addition	
TILE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	JITLE NAME STREET AD CITY-ST-Z	i i] Change	Addition	
indicated of the cor	on this report poration or th	t or supplemental report is e receiver or trustee empo	this filing does not qualify fo true and accurate and that n wered to execute this report ith all other like empowered.	ny signature :	shall have the	same legal elled	of as if made under o	ath; that I am	an officer	or director	