


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 05, 2004 08:00 AM
Secretary of State

DOCUMENT # K72095 1. Entity Name PHILIP'S DEVELOPMENT CORPORATION, INC.	
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Principal Place of Business PHILIP S. STEEL 2030 HARBORTOWN DRIVE, STE B FT. PIERCE, FL 34946-1438	Mailing Address PHILIP S. STEEL 2030 HARBORTOWN DRIVE, STE B FT. PIERCE, FL 34946-1438
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01092004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0102352	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**STEEL, PHILIP S.
2030 HARBORTOWN DR.
STE. B
FT. PIERCE, FL 34946**

**DO NOT WRITE
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 signature required when reissuing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	STEEL, PHILIP S.
STREET ADDRESS	2030 HARBORTOWN DR., STE. B
CITY - ST - ZIP	FT. PIERCE, FL

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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STREET ADDRESS	
CITY - ST - ZIP	

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04/05/04-80040-014 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 APRIL 04 (772) 465-8322
Date Daytime Phone #