2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K72095

1. Entity Name

PHILIP'S DEVELOPMENT CORPORATION, INC.



FILED Apr 14, 2008 08:00 Al Secretary of State

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



DO NOT WRITE IN THIS SPACE

04022008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

65-0102352

DO NOT WRITE

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name	and Add	ress of Curre	ent Registered Ageni

STEEL, PHILIP S. 2030 HARBORTOWN DR. STE. B

HILIP S. BORTOWN DR.

STE. B FT. PIERCE, FL 34946 IN THIS SPACE

	bove named entity submits this statement for the purpose of changi oligations of registered agent.	ng its registered office or registered agent, or both	n, in the State of Florida.	i am familiar with, a	nd accept
SIGNAT	JRE	(NOTE: Registered Agent signature required when reinstalling)		DATE	

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

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

U00000895732 4/24/08-80080-004 150.00

10.	OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEEL, PHILIP S. 2030 HARBORTOWN DR., STE. B FT. PIERCE, FL 34946		
NAME			

DO NOT WRITE IN THIS SPACE

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

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 eath; that I am an officer or director of the corporation or the receiver on 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

772-465-8323 Davime Proce #

Date