2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L20092

Entity Name: VORNADO DEVELOPMENT, INC.

FILED May 01, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2223 TRADE CENTER WAY 2316 PINE RIDGE RD

NAPLES, FL 34109 #327

NAPLES, FL 34109 US

Current Mailing Address: New Mailing Address:

2223 TRADE CENTER WAY 2316 PINE RIDGE RD NAPLES, FL 34109

#327

NAPLES, FL 34109 US

FEI Number: 65-0153647 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:

HUBSCHMAN, ADAM WOOD, DOUG 1000TÁMIAMI TRAIL N 2223 TRADE CENTER WAY NAPLES, FL 34109 #401 NAPLES, FL 34102 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: DOUG WOOD 05/01/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition HUBSCHMAN, SAMUEL HUBSCHMAN, SIDNEY Name: Name:

2223 TRADE CENTER WAY 2316 PINE RIDGE RD #327 Address: Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109

Title: Title: () Change () Addition () Delete

HUBSCHMAN, ADAM Name: Name: 2223 TRADE CENTER WAY Address: Address: NAPLES, FL 34109 City-St-Zip: City-St-Zip:

() Delete Title: Title: () Change () Addition

HUBSCHMAN, CONNIANNE Name: Name: 2223 TRADE CENTER WAY Address Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip:

Title: () Delete Title: () Change (X) Addition

HUBSCHMAN, SAMUEL Name: Name: Address: Address: 2316 PINE RIDGE RD #327 City-St-Zip: City-St-Zip: NAPLES, FL 34109

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.

Ρ SIGNATURE: SIDNEY HUBSCHMAN 05/01/2008