2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 30, 2007 8:00 am Secretary of State DOCUMENT # L58907 04-30-2007 90409 004 ***150.00 1. Entity Name BBA DEVELOPMENT CORP. Mailing Address Principal Place of Business 40082012 12500 HUNTERS RIDGE DR 12500 HUNTERS RIDGE DR BONITA SPRINGS, FL 33923 US BONITA SPRINGS, FL 34135 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) Chg-P 04032007 City & State City & State 4. FEI Number Applied For 65-0191438 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HUPRICH, DONALD GL Street Address (P.O. Box Number is Not Acceptable) 12500 HUNTERS RIDGE DR BONITA SPRINGS, FL 34135 Zip Code City FI 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 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. DP TITLE ☐ Delete TITLE ☐ Change ■ Addition STREET, HA NAME NAME STREET ADDRESS STREET ADDRESS 339 WEST MAIN ST CITY-ST-ZIP CITY-ST-7:P **GRUNDY, VA 24614** ☐ Delete ☐ Change TITLE ☐ Addition TITLE NAME FOWLER, GAYNELL STREET ADDRESS 28201 ALFRED MOORE CT. STREET ADDRESS CITY-ST-ZIP BONITA SPRINGS, FL 34135 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HUPRICH, DONALD G NAME NAME STREET ADDRESS 6730 MILL RUN CIR. STREET ADDRESS CITY-ST-ZIP NAPLES, FL 341097200 CITY-ST-ZIP ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby 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 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: _

Anula G. Hujl Donald G. Huprich
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED