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2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

08 MAR 31 AM 11:00

CLERK OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L91828

1. Entity Name
FLORIDAYS DEVELOPMENT CO.Principal Place of Business
73 S. PALM AVE
SUITE 223
SARASOTA, FL 34236 USMailing Address
73 S. PALM AVE
STE 223
SARASOTA, FL 34236 US

01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3140330	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ROGERS, ANGUS C.
73 S. PALM AVE.
223
SARASOTA, FL 34236DO 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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.009. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPV
NAME	ROGERS, ANGUS C.
STREET ADDRESS	73 S. PALM AVE #223
CITY-ST-ZIP	SARASOTA, FL 34236

TITLE	ST
NAME	ROGERS, ANGUS C.
STREET ADDRESS	73 S. PALM AVE. #223
CITY-ST-ZIP	SARASOTA, FL 34236

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CITY-ST-ZIP	

900122233289
04/04/08--01009--008 **277.50DO NOT WRITE
IN THIS SPACE

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 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

Date

Daytime Phone #

Angus C. Rogers Angus C. Rogers 25 MAR 08 (941) 362-9377