## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M73402

**FILED** Feb 25, 2008 Secretary of State

**Entity Name: ATHENA DEVELOPMENT CORPORATION Current Principal Place of Business: New Principal Place of Business:** 2141B DOBBS RD. ST. AUGUSTINE, FL 32086 LIS **Current Mailing Address: New Mailing Address:** P. O. DRAWER 129 ELKTON, FL 32033 US FEI Number: 59-2876034 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: JENNINGS, PATRICIA K. 2141B DOBBS RD. ST. AUGUSTINE, FL 32086 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition JENNINGS, PATRICIA K, . JENNINGS, PATRICIA K, . Name: Name: 2141B DOBBS RD. 2141B DOBBS RD. Address: Address: City-St-Zip: SAINT AUGUSTINE, FL 32086 City-St-Zip: SAINT AUGUSTINE, FL 32086 US Title: Title: () Delete (X) Change ( ) Addition SMITH, JEFFREY E Name: SMITH, JEFFREY E Name: 2141B DOBBS RD. 2141B DOBBS RD. Address: Address: SAINT AUGUSTINE, FL 32086 SAINT AUGUSTINE, FL 32086 US City-St-Zip: City-St-Zip: Title: Title: (X) Change ( ) Addition

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.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

FORANCE, STEPHAN P

FORANCE, GEORGE E III

100 NORTH COUNTY ROAD

SOUTHAMPTON, MA 01073 US

SAINT AUGUSTINE, FL 32086 US

( ) Change (X) Addition

2141B DOBBS RD

Ρ SIGNATURE: PATRICIA K. JENNINGS 02/25/2008

( ) Delete

( ) Delete

SAINT AUGUSTINE, FL 32086

FORANCE, STEPHAN P

2141B DOBBS RD

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip: