2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005
Secretary of State

DOCUMENT# M77587

Entity Name: J.T.H. DEVELOPMENT CORPORATION

Current Principal Place of Business:

5380 NORTH OCEAN DRIVE
SUITE 10H
RIVIERA BEACH, FL 334042534

New Principal Place of Business:

Current Mailing Address:

5380 NORTH OCEAN DRIVE
SUITE 10H
RIVIERA BEACH, FL 334042534

New Mailing Address:

FEI Number: 36-3586458 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DYTRYCH, MARTIN A.
2700 PGA BLVD
STE 203
PALM BEACH, FL 33410 US

Name and Address of New Registered Agent:

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:

Title: D ( ) Delete
Name: LYONS, DEBBIE
Address: 5380 N. OCEAN DR.
City-St-Zip: SINGER ISLAND, FL

Title: DVP ( ) Delete
Name: LYONS, V T
Address: 5380 N OCEAN DR
City-St-Zip: SINGER ISLAND, FL 33404

Title: ST ( ) Delete
Name: PETRIDES, DESPIN L
Address: 5380 N OCEAN DR
City-St-Zip: SINGER ISLAND, FL 33404

Title: PD ( ) Delete
Name: PETRIDES, MILTON D
Address: 5380 N. OCEAN DR.
City-St-Zip: SINGER ISLAND, FL 33404

Title: D ( ) Delete
Name: LYONS, CHRIS
Address: 5380 N OCEAN DR #10 H
City-St-Zip: SINGER ISLAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change ( ) Addition
Name: LYONS, J T
Address: 5380 N OCEAN DR
City-St-Zip: SINGER ISLAND, FL 33404

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: MILTON PETRIDES PRES 03/10/2005

Electronic Signature of Signing Officer or Director — Date