

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000318

FILED
Apr 20, 2008
Secretary of State

Entity Name: GLOBAL DEVELOPMENMT GROUP USA, INC.

Current Principal Place of Business:

1314 LONGWOOD OAKS BLVD
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

1314 LONGWOOD OAKS BLVD
LAKELAND, FL 33811

New Mailing Address:

FEI Number: 20-5988003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARMSTRONG, PAULA
1314 LONGWOOD OAKS BLVD
LAKELAND, FL 33811 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ARMSTRONG, PAULA
Address: 1314 LONGWOOD OAKS BLVD
City-St-Zip: LAKELAND, FL 33811

Title: DS () Delete
Name: ARMSTRONG, COLIN
Address: 1314 LONGWOOD OAKS BLVD
City-St-Zip: LAKELAND, FL 33811

Title: D () Delete
Name: VANDERGRIEND, HOWARD
Address: 5610 SOUTHWIND DR
City-St-Zip: MULBERRY, FL 33860

Title: D () Delete
Name: VANDERGRIEND, SANDRA
Address: 5610 SOUTHWIND DR
City-St-Zip: MULBERRY, FL 33860

Title: D () Delete
Name: BENSON, ALLAN
Address: 8 STEPHEN CT CLEVELAND
City-St-Zip: QUEENSLAND, 4163 AUSTRALIA,

Title: D () Delete
Name: BOLTON, ROBERT
Address: 1251 STRATTON DR
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAULA C. ARMSTRONG

DP

04/20/2008

Electronic Signature of Signing Officer or Director

Date