

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2005 08:00 AM
Secretary of State

DOCUMENT # N95000001713	
1. Entity Name UNITED DEVELOPMENT COMMUNITIES, INC.	

Principal Place of Business 3706 NO. OCEAN BLVD. STE 370 FORT LAUDERDALE, FL 33308	Mailing Address 3706 NO. OCEAN BLVD. STE 370 FORT LAUDERDALE, FL 33308
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DO NOT WRITE IN THIS SPACE



01042005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0591072	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MIMNA, CURTIS
3706 NO. OCEAN BLVD. STE 370
FORT LAUDERDALE, FL 33308**

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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

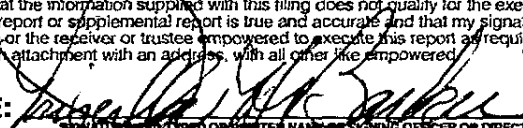
Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD NEEDLEMAN, LENNY 3706 NORTH OCEAN BLVD, SUITE 370 FORT LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED BARKER, PRISCILLA 3706 N OCEAN BLVD, SUITE 370 FORT LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD BARNES, LIZ 3706 N OCEAN BLVD, SUITE 370 FORT LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JACUMIN, ROBERT 3706 NORTH OCEAN BLVD, SUITE 370 FORT LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

UDD0000238347
02/21/05-80095-013 70.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Priscilla H. Barker** **2/16/05** **994** **537-3055**

SIGNATURE REQUIRED ON ATTACHED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #