


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000036415	
1. Entity Name VANTAGE POINT DEVELOPMENT, INC.	

Principal Place of Business 13305 PANAMA CITY BEACH PKWY PANAMA CITY BEACH, FL 32407	Mailing Address 13305 PANAMA CITY BEACH PKWY PANAMA CITY BEACH, FL 32407
--	--

DO NOT WRITE IN THIS SPACE



02172004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3640376	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CARR, MICHAEL V
3602 PRESERVE BLVD.
PANAMA CITY, FL 32408**

**DO 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when releasing)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	UN00000097230 03/26/04-80032-003 158.75
---	--	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARR, MICHAEL V 3602 PRESERVE BLVD PANAMA CITY, FL 32408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARR, LIND E 3602 PRESERVE BLVD. PANAMA CITY, FL 32408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEPHENS, LARRY W 1717 BROWN AVENUE PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEPHENS, TERESA A 1717 BROWN AVENUE PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Michael V. Carr **3/25/04** **(850) 230-5812**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #