

2002 **FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 27, 2002 8:00 am**  
**Secretary of State**

DOCUMENT # P00000089075

05-27-2002 90430 017 \*\*\*150.00

1. Entity Name

MAGEE DEVELOPMENT INTERNATIONAL CORP.

U I U I O 4

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 31 ISLAND WAY Suite, Apt. #, etc. #1005 City & State CLEARWATER BEACH, FL Zip 33767 Country		3. Mailing Address 31 ISLAND WAY Suite, Apt. #, etc. #1005 City & State CLEARWATER BEACH, FL Zip 33767 Country	
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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3672529	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name MAGEE, WILLIAM J.
Street Address (P.O. Box Number is Not Acceptable) 31 ISLAND WAY #1005
City CLEARWATER BEACH FL Zip Code 33767

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.

SIGNATURE *Bill Magee* (NOTE: Registered Agent signature required when reinstating) DATE 4/30/2

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$6125  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P/S/T MAGEE, WILLIAM J. 31 ISLAND WAY, #1005 CLEARWATER BEACH, FL 33767	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Bill Magee* WILLIAM J. MAGEE DATE 4/30/2