## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P01000114893**

1. Entity Name

PERMENTER DEVELOPMENT CORP., INC.



FILED Jan 15, 2008 08:00 AN Secretary of State

Principal Place of Business

282 PLANTATION HILL RD PENSACOLA BEACH, FL 32561 Mailing Address

282 PLANTATION HILL RD PENSACOLA BEACH, FL 32561



## DO NOT WRITE IN THIS SPACE

01082008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3760631

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

R. DOUGLAS PERMENTER 282 PLANTATION HILL RD PENSACOLA BEACH, FL 32561

## DO NOT WRITE IN THIS SPACE

		<del></del>			
	named entity submits this statement for the plions of registered agent.	ourpose of changing its registered office	or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signalure, lyped or prinked name of regularies agent and the	tappicable, (NOTE: Registered Agentisg:	ature required when reinstaling)	DATE	
FiL After M	E NOW!!! FEE IS \$150,00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be Added to Fees	000000785137 01/16/08-80084-008 150.0	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD R. DOUGLAS PERMENTER 282 PLANTATION HILL RD PENSACOLA BEACH, FL 32561				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PERMENTER, ELIZABETH A 236 SABINE DRIVE PENSACOLA BEACH, FL 32561				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADORESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

TITLE HAME STREET AODRESS CITY-ST-ZIP

R Domylas Permenter

<u> / //y/o</u>

850-892-2103