## **2006 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

DOCUMENT # P02000008449



**FILED** May 02, 2006 8:00 am Secretary of State 05-02-2006 90159 040 \*\*\*150.00

1. Entity Name DEVELOPMENT CAPITAL CORP.											
Principal Place of Business			Mailing Address								
5934 TROUBLE CREEK RD NEW PORT RICHEY, FL 34652			5934 TROUBLE CREEK RD NEW PORT RICHEY, FL 34652								
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				04262006	Chg-P	CR2E	34 (11/05)		
City & State			City & State				4. FEI Numb	-		1	oplied For of Applicable
Zip			Zip Country		try			e of Status Desire		\$8.75 Add Fee Require	
6. Name and Address of Current Registered Agent					.,		7. Name and	d Address of Nev	w Registered	Agent	
NEWCOHE		I ES H			Name						
NEWCOHER, CHARLES H 5934 TROUBLE CREEK RD NEW PORT RICHEY, FL 34652					Street Address (P.O. Box Number is Not Acceptable)						
					City	•			FL	Zip Cod	e
8. The above n			r the purpose of changing its	registere	ed office or	registere	ed agent, or bo	oth, in the State of		familiar with,	and accept
SIGNATURE	Signature, typed	or printed name of registered agent a	ind little if applicable. (NOTI	E. Registere	d Agent signati	are required	when reinstating)		DATE		<del></del>
			<u> </u>								
		FEE IS \$150.00 Fee will be \$550.0	9. Election Campa Trust Fund Cont		icing	<b>\$5.</b> Adde	00 May Be ed to Fees				}
			Trust Fund Cont			<b>\$5.</b> Adde	ed to Fees	/CHANGES TO C	DFFICERS AND	DIRECTOR	S IN 11
After May	y 1, 2006 PD	OFFICERS AND I	Trust Fund Cont	ribution.		\$5. Adde	ed to Fees	/CHANGES TO C	DFFICERS AND	DIRECTOR	S IN 11
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Increox ceruly mat the information supplied with this filling 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.

GNATURE:

GNATURE:

4/4/6/06

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