


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 8:00 am
Secretary of State

01-12-2006 90199 002 ***150.00

DOCUMENT # P02000064417 1. Entity Name MONDAVI DEVELOPMENT CORP.					
Principal Place of Business 942 N. COLLIER BLVD. MARCO ISLAND, FL			Mailing Address 942 N. COLLIER BLVD. MARCO ISLAND, FL		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 20-0823432	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent MORRIS, WILLIAM J ESQ. 247 NORTH COLLIER BLVD. #202 MARCO ISLAND, FL 33145				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE	D OYER, STEVE D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
NAME	928 N COLLIER BLVD	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	
STREET ADDRESS	MARCO ISLAND, FL 34145	STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP	
CITY-ST-ZIP	MARCO ISLAND, FL 34145	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP	
CITY-ST-ZIP	MARCO ISLAND, FL 34145	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP	
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CITY-ST-ZIP	MARCO ISLAND, FL 34145	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP	
CITY-ST-ZIP	MARCO ISLAND, FL 34145	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP	
12. I hereby 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: <u>JOSEPH D BOFF</u> 1-6-06 239 394 9107 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					