


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 01, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000132527</b> 1. Entity Name SANCARO DEVELOPMENT, INC.	
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Principal Place of Business 930 CAPE MARCO DRIVE PH-3 MARCO ISLAND, FL 34145	Mailing Address 930 CAPE MARCO DRIVE PH-3 MARCO ISLAND, FL 34145
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**DO NOT WRITE IN THIS SPACE**



01072006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1165455	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

WOODWARD, CRAIG R  
WOODWARD WOODWARD PIRES & LOMBARDO PA  
606 BALD EAGLE DRIVE SUITE 500  
MARCO ISLAND, FL 34146

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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GLON, DALE 930 CAPE MARCO DRIVE PH-3 MARCO ISLAND, FL 34145
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALBAUGH, DENNIS 930 CAPE MARCO DRIVE PH-3 MARCO ISLAND, FL 34145
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02/11/06-80077-021 158.75

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IN THIS SPACE**

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:** Dale Glon DALE GLON - President 1-28-06 2393945217  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #