## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 30, 2008 08:00 AM **Secretary of State** DOCUMENT # P03000005131 SEMANIK DEVELOPMENT, INC. Principal Place of Business Mailing Address 2120 CORPORATE SQUARE BLVD. 2120 CORPORATE SQUARE BLVD. SUITE #3 SUITE #3 JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32216 04252008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FE! Number Applied For 43-1999752 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SEMANIK, JOHN A DO NOT WRITE 2120 CORPORATE SQUARE BLVD. SUITE #3 IN THIS SPACE JACKSONVILLE, FL 32216 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 05/23/08-80042-006 150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS TITLE CARPENTER, KATHERINE S. NAME 2120 CORPORATE SQ BLVD #3 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32216 TITLE SEMANIK, JOHN A NAME 2120 CORPORATE SQ BLVD #3 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32216 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-SI-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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 dustee 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 impowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

**FILED**