2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000046360

Entity Name: 213B DEVELOPMENT CO., INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
4460 LEGE SUITE 400 DESTIN, FL	NDARY DR. _ 32541 US	3						
Current Mailing Address:				New Mailing Address:				
SUITE 400	NDARY DR.	2						
DESTIN, FL		_						
FEI Number:	51-0465644	FEI Nun	nber Applied For ()	FEI Number Not Appli	cable ()	Certificate of Status	Desired ()	
Name and	Address of C	urrent R	Registered Agent:	Name and	Name and Address of New Registered Agent:			
300A WHA	NITCHELL W RFSIDE WAY VILLE, FL 322	07 US	6					
The above in the State		submits th	his statement for the pu	rpose of changing it	s registered o	ffice or registered	agent, or both,	
SIGNATUR	RE:							
Electronic Signature of Registered Agent				t	Date			
Election Cam	paign Financing	Trust Fur	nd Contribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DPT () BOS, PETER H 4460 LEGENDA DESTIN, FL 32	RY DR., S	SUITE 400	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	V () PATTON, THOM 4460 LEGENDA DESTIN, FL 32	RY DR., S	SUITE 400	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	DS () BOS, TERESA I 4460 LEGENDA DESTIN, FL 32	RY DR., S	SUITE 400	Title: Name: Address: City-St-Zip:	BOS, TERESA	ARY DR., SUITE 400		
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	BUSFIELD, DAY	ARY DR., SUITE 400		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER H BOS III P 04/27/2005