

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90196 020 ***150.00

DOCUMENT # P03000073778

1. Entity Name
 COPLEY SQUARE DEVELOPMENT, INC.



Principal Place of Business
 11 N SUMMERLIN AVE, STE 100
 ORLANDO, FL 32801

Mailing Address
 11 N SUMMERLIN AVE, STE 100
 ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

40081416



01302007 No Chg-P CR2E034 (11/05)

4. FEI Number
 30-0189307

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, BARRY L
 11 N SUMMERLIN AVE, STE 100
 ORLANDO, FL 32801

DO NOT WRITE 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MILLER, BARRY L
STREET ADDRESS	11 N SUMMERLIN AVE, STE 100
CITY-ST-ZIP	ORLANDO, FL 32801
TITLE	PVTS
NAME	MILLER, BARRY L
STREET ADDRESS	11 N SUMMERLIN AVE, STE 100
CITY-ST-ZIP	ORLANDO, FL 32801
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Barry L. Miller 4/17/07 407-425-2400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #