


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90065 025 ***150.00

DOCUMENT # P03000078804 1. Entity Name ARNCO COMMERCIAL DEVELOPMENTS, INC.	
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Principal Place of Business P O BOX 450037 KISSIMMEE, FL 34741 341 WEST OAK ST KISSIMMEE FL 34741	Mailing Address P O BOX 450037 KISSIMMEE, FL 34741
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40014026

DO NOT WRITE IN THIS SPACE

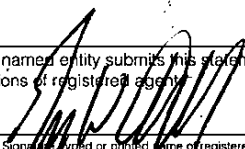


01242005 No Chg-P CR2E034 (10/03)

4. FEI Number 54-2146769	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ARNOLD, GEORGE 8 BROADWAY 341 W OAK STREET KISSIMMEE, FL 34741

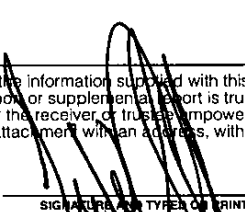
DO NOT WRITE IN THIS SPACE

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  <small>Signature typed or printed name of registered agent and title if applicable.</small>	George W. Arnold President 01-26-05 <small>(NOTE: Registered Agent signature required when reinstating) DATE</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	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	P ARNOLD, GEORGE W 1213 ERNEST ST. 341 W. OAK ST. KISSIMMEE, FL 34745 34741
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ARNOLD, BENJAMIN W 1213 ERNEST ST. 341 W. OAK ST. KISSIMMEE, FL 34745 34741
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITH, DEATA DEATA Mc Cubbin 1213 ERNEST ST. 341 W. OAK ST. KISSIMMEE, FL 34745 34741
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 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 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	George W. Arnold President 01-26-05 407-932-0111 <small>Date Daytime Phone #</small>