2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000099985

Entity Name: REGINA ESTATES DEVELOPMENT, INC.

FILED Apr 24, 2009 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | | |
|---|---|---|-----------|--|---|--|------|
| | HWY 19 NORTH | 1 | | | | | |
| SUITE 100 PALM HAR | RBOR, FL 34684 | 4 US | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | |
| SUITE 100 | HWY 19 NORTH | | | | | | |
| FEI Number: | , | FEI Number Applied For () | FEI Num | nber Not Appli | cable () | Certificate of Status Desired () | |
| Name and | Address of Cu | rrent Registered Agent: | | Name and | Address of N | lew Registered Agent: | |
| 1574 VILLA TALLAHAS | | LVD., #100 | urpose of | ⁻ changing it | s registered o | ffice or registered agent, or bo | oth, |
| SIGNATUR | | | | | | | |
| SIGNATOR | | : Signature of Registered Age | nt | | | Date | |
| Election Can | | Trust Fund Contribution (). | | | | Duto | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: Title: Name: | PLANES, REGINA 32801 US HWY 1 PALM HARBOR, I CEOD () D PLANES, WILLIA | 9 NORTH SUITE 100 FL 34684 US Jelete M SR. | | Title: Name: Address: City-St-Zip: Title: Name: | PLANES, REGIN 32801 US HWY PALM HARBOR DCEO (X) PLANES, WILLI | 19 NORTH SUITE 100 , FL 34684 US Change () Addition IAM SR. | |
| Address: City-St-Zip: | 32801 US HWY 1 PALM HARBOR, I | 9 NORTH SUITE 100 FL 34684 US | | Address: City-St-Zip: | 32801 US HWY PALM HARBOR | 19 NORTH SUITE 100 , FL 34684 US | |
| Title: Name: Address: City-St-Zip: | PLANES, WILLIA | 9 NORTH SUITE 100 | | Title: Name: Address: City-St-Zip: | PLANES, WILLI | 19 NORTH SUITE 100 | |
| Title: Name: Address: City-St-Zip: | S () C WHITE, LANGFRI 32815 U.S. HWY PALM HARBOR, I | 19 NO. | | Title: Name: Address: City-St-Zip: | () | Change () Addition | |
| Title: Name: Address: City-St-Zip: | SRVP () D AIELLO, PAUL 32801 US HWY 1 PALM HARBOR, I | | | Title: Name: Address: City-St-Zip: | SRVP (X) AIELLO, PAUL 3 32801 US HWY PALM HARBOR | 19 NO | |
| Title: Name: Address: City-St-Zip: | BROWN, SHEAW | 9 NORTH SUITE 100 | | Title: Name: Address: City-St-Zip: | BROWN, SHEA | 19 NORTH SUITE 100 | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LANGFRED W. WHITE S 04/24/2009