

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104053

FILED
Apr 25, 2005
Secretary of State

Entity Name: ACHIEVE DEVELOPMENT INC

Current Principal Place of Business:

12510 MEMORIAL HWY
TAMPA, FL 33635 US

New Principal Place of Business:

Current Mailing Address:

19046 BRUCE B. DOWNS
DMB #181
TAMPA, FLORIDA, FL 33647 US

New Mailing Address:

FEI Number: 20-0252461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HURDLE, NELSON
19046 BRUCE B DOWNS
DMB #181
TAMPA, FL US US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HURDLE, NELSON H
Address: 19046 BRUCE B DOWNS BLVD #181
City-St-Zip: TAMPA, FL 33647

Title: S () Delete
Name: HURDLE, VINEA
Address: 3902 CORPOREX PARK DRIVE SUITE 100
City-St-Zip: TAMPA, FL 33619

Title: CT () Delete
Name: WRIGHT, NAMON
Address: 12510 MEMORIAL HWY
City-St-Zip: TAMPA, FL 33635 US

Title: M () Delete
Name: CALLOWAY, DEAN A
Address: 3774 LANDAU LANE
City-St-Zip: ATLANTA, GA 30331 US

Title: M () Delete
Name: GIPSON, LOVELACE
Address: 1043 TWINKLE TOWN ROAD
City-St-Zip: MEMPHIS, TN 38116 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NELSON HURDLE

P

04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date