

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109519

FILED
Apr 26, 2004
Secretary of State

Entity Name: VIKING DEVELOPMENT CORPORATION

Current Principal Place of Business:

1785 CHERYL LANE
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

1785 CHERYL LANE
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 56-2402351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EKDAHL, PAUL E
965 SPRING GARDEN STREET
ALTAMONTE SPRINGS, FL 32701 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: D () Delete
Name: EKDAHL, PAUL E
Address: 965 SPRING GARDEN STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D () Delete
Name: EKDAHL, ROBERT A
Address: 2509 RIDGEWIND WAY
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: EKDAHL, WILLIAM
Address: 1785 CHERYL LANE
City-St-Zip: KISSIMMEE, FL 34744

Title: () Delete
Name:
Address:
City-St-Zip:

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: O () Change (X) Addition
Name: EKDAHL, KAREN R
Address: 1785 CHERYL LANE
City-St-Zip: KISSIMMEE, FL 34744

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: KAREN EKDAHL

VP

04/26/2004

Electronic Signature of Signing Officer or Director

_____ Date