

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000119813

FILED
Apr 25, 2009
Secretary of State

Entity Name: OLD FLORIDA TRUST DEVELOPMENT COMPANY

Current Principal Place of Business:

1261 WALES DR
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

1261 WALES DR
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 74-3108648

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JURSINSKI, KEVIN F
7800 UNIVERSITY POINTE DR STE 200
FT MYERS, FL 33907 US

Name and Address of New Registered Agent:

SWINK, SIDNEY A
1261 WALES DRIVE
FT MYERS, FL 33901 US

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: SIDNEY A SWINK

04/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: SWINK, SIDNEY
Address: 4120 SW 20 AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: V () Delete
Name: JORDAN, CLYDE
Address: 4120 SW 20 AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: V () Delete
Name: JORDAN, TRUDIE
Address: 4120 SW 20 AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: S () Delete
Name: SWINK, SUSAN
Address: 4120 SW 20 AVE
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: SWINK, SIDNEY
Address: 1261 WALES DRIVE
City-St-Zip: FT. MYERS, FL 33901

Title: V (X) Change () Addition
Name: JORDAN, CLYDE H
Address: 6325 CAHOBA DRIVE
City-St-Zip: FT WORTH, TX 76135

Title: V (X) Change () Addition
Name: JORDAN, TRUDIE
Address: 6325 CAHOBA DRIVE
City-St-Zip: FT. WORTH, TX 76135

Title: S (X) Change () Addition
Name: SWINK, SUSAN
Address: 1261 WALES DRIVE
City-St-Zip: FT. MYERS, FL 33901

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: SIDNEY SWINK

PT

04/25/2009

Electronic Signature of Signing Officer or Director

Date