

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000021601

Entity Name: MAGNOLIA KEY DEVELOPMENT, INC.

FILED
Jun 11, 2007
Secretary of State

Current Principal Place of Business:

242 FIFTH AVE.
INDIALANTIC, FL 329033307

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 33307
INDIALANTIC, FL 329033307

New Mailing Address:

FEI Number: 20-0720773

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KANCILIA, JOHN R
1800 WEST HIBISCUS BLVD., STE. 138
MELBOURNE, FL 32901 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COCHRAN, ROBERT L SR.
Address: 242 FIFTH AVE.
City-St-Zip: INDIALANTIC, FL 329033307

Title: STD () Delete
Name: COCHRAN, EVA M
Address: 242 FIFTH AVE.
City-St-Zip: INDIALANTIC, FL 329033307

Title: VPD () Delete
Name: COCHRAN, ROBERT L JR.
Address: 242 FIFTH AVE.
City-St-Zip: INDIALANTIC, FL 32903

Title: VPD () Delete
Name: MILLER, SUSAN D
Address: 990 SPRING OAK DR.
City-St-Zip: MELBOURNE, FL 32901

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

Title: VP () Change (X) Addition
Name: DAVIS, CLINTON D
Address: 428 VERACRUZ BLVD
City-St-Zip: INDIALANTIC, FL 32903

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: ROBERT L. COCHRAN, SR.

PRES

06/11/2007

Electronic Signature of Signing Officer or Director

Date