

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000060213**

1. Entity Name  
**8TH STREET DEVELOPMENT CORP.**



Principal Place of Business

**5580 8TH STREET WEST  
SUITE 6 + 7  
LEHIGH ACRES, FL 33971**

Mailing Address

**5580 8TH STREET WEST  
SUITE 6 + 7  
LEHIGH ACRES, FL 33971**



04242008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**02-0722542**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**STARLINS, HEYWARD  
5580 8TH STREET WEST  
SUITE 6 + 7  
LEHIGH ACRES, FL 33971**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000938344

05/27/08-80087-014 158.75

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	DEANGELIS, JOHN M
STREET ADDRESS	2316 HARRIER RUN
CITY-ST-ZIP	NAPLES, FL 34105
TITLE	VSD
NAME	DIAMOND, DAVID B
STREET ADDRESS	28650 ALTESSA WAY, NO. 201
CITY-ST-ZIP	BONITA SPRINGS, FL 34135
TITLE	P
NAME	STARLING, HEYWARD B
STREET ADDRESS	10090 VALIANT CT. NO. 201
CITY-ST-ZIP	MIROMAR LAKES, FL 33913
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Heyward Starlings* 4/28/08