## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P04000063835

FILED Jun 15, 2005 Secretary of State

Entity Name: ORMOND INTERNATIONAL DEVELOPMENT CORP.

**Current Principal Place of Business: New Principal Place of Business:** 374 S ATLANTIC AVE ORMOND BEACH, FL 32176 **Current Mailing Address: New Mailing Address:** P O BOX 366 374 S ATLANTIC AVE ORMOND BEACH, FL 32176 ORMOND BEACH, FL 32175 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C A SATTENFIELD PO BOX 346 BARBERVILLE, FL 32105 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title: ( ) Delete Title: MORGAN, DIANE SATTENFIELD, COURTNEY A Name: Name: 374 S ATLANTIC AVE 374 S ATLANTIC AVE Address: Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32176

Title: PS () Delete Title: () Change () Addition

SATTENFIELD, CURTIS W Name: Name: 374 S ATLANTIC AVE Address: Address: ORMOND BEACH, FL 32176 City-St-Zip: 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 Statutés. 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: CURTIS SATTENFIELD PS 06/15/2005