


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000087069
 1. Entity Name
 PL DEVELOPMENT-C, INC.



Principal Place of Business
 1840 PHILLIPI SHORES DR
 SARASOTA, FL 34231

Mailing Address
 PO BOX 20708
 SARASOTA, FL 34276



04252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 20-1210727

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SEIDER, WILLIAM
 200 S ORANGE AVE
 SARASOTA, FL 34236

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-instating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CARRION, JAIME S
STREET ADDRESS	3665 BEE RIDGE RD SUITE 310
CITY-ST-ZIP	SARASOTA, FL 34231
TITLE	PD
NAME	MORRIS, ROBERT A JR
STREET ADDRESS	1840 PHILLIPI SHORES DR
CITY-ST-ZIP	SARASOTA, FL 34231
TITLE	V
NAME	MORRIS, III, ROBERT A
STREET ADDRESS	1840 PHILLIPI SHORES DRIVE
CITY-ST-ZIP	SARASOTA, FL 34231
TITLE	ST
NAME	THOMAS, DORA MARIA C.
STREET ADDRESS	3665 BEE RIDGE ROAD
CITY-ST-ZIP	SARASOTA, FL 34233
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 05/10/06-80129-008 150.00

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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: Robert A. Morris Jr ROBERT A MORRIS JR
 PRESIDENT
 4/27/06
 941-923-6353

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #