

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087069

Entity Name: PL DEVELOPMENT-C, INC.

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

1921 MONTE CARLO DRIVE
UNIT 703
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

PO BOX 20708
SARASOTA, FL 34276

New Mailing Address:

FEI Number: 20-1210727 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEIDER, WILLIAM
200 S ORANGE AVE
SARASOTA, FL 34236 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARRION, JAIME S
Address: 3665 BEE RIDGE RD SUITE 310
City-St-Zip: SARASOTA, FL 34231

Title: PD () Delete
Name: MORRIS, ROBERT A JR
Address: 1921 MONTE CARLO DRIVE, UNIT 703
City-St-Zip: SARASOTA, FL 34231

Title: V () Delete
Name: MORRIS, III, ROBERT A.
Address: 1921 MONTE CARLO DRIVE, UNIT 703
City-St-Zip: SARASOTA, FL 34231

Title: ST () Delete
Name: THOMAS, DORA MARIA C.
Address: 3665 BEE RIDGE ROAD
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CARRION, JAIME S
Address: 3665 BEE RIDGE RD SUITE 310
City-St-Zip: SARASOTA, FL 34233

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

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

Title: ST (X) Change () Addition
Name: THOMAS, DORA MARIA C.
Address: 3665 BEE RIDGE RD SUITE 310
City-St-Zip: SARASOTA, FL 34233

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 A. MORRIS, JR.

DP

04/17/2009

Electronic Signature of Signing Officer or Director

_____ Date