

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036656

FILED
Mar 24, 2009
Secretary of State

Entity Name: BOCA CIEGA BAY DEVELOPMENT CORPORATION

Current Principal Place of Business:

597 COREY AVENUE
ST. PETE BEACH, FL 33706

New Principal Place of Business:

599 COREY AVENUE
ST. PETE BEACH, FL 33706

Current Mailing Address:

597 COREY AVENUE
ST. PETE BEACH, FL 33706

New Mailing Address:

599 COREY AVENUE
ST. PETE BEACH, FL 33706

FEI Number: 20-2310741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOUGLASS, ROBERT A
597 COREY AVENUE
ST. PETE BEACH, FL 33706 US

Name and Address of New Registered Agent:

DOUGLASS, ROBERT A
599 COREY AVENUE
ST. PETE BEACH, FL 33706 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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DOUGLASS, ROBERT A
Address: 597 COREY AVENUE
City-St-Zip: ST. PETE BEACH, FL 33706

Title: VD () Delete
Name: CLARK, ROBERT P
Address: 3901 13TH WAY NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: SD () Delete
Name: WADSWORTH, LON C
Address: 597 COREY AVENUE
City-St-Zip: ST. PETE BEACH, FL 33706

Title: TD () Delete
Name: E. RALPH CRAWFORD,
Address: 563 HAVEN POINT DRIVE
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DOUGLASS, ROBERT A
Address: 599 COREY AVENUE
City-St-Zip: ST. PETE BEACH, FL 33706

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

Title: SD (X) Change () Addition
Name: WADSWORTH, LON C
Address: 599 COREY AVENUE
City-St-Zip: ST. PETE BEACH, FL 33706

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

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. DOUGLASS

PD

03/24/2009

Electronic Signature of Signing Officer or Director

Date