2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036683

FILED Apr 30, 2009 Secretary of State

Entity Name: TRABUE-WOODS ECONOMIC DEVELOPMENT CORPORATION

Current Principal Place of Business: New Principal Place of Business: C/O JILL C. MCCRORY 99 NESBIT STREET 211 WOOD STREET PUNTA GORDA, FL 33950 PUNTA GORDA, FL 33950 **New Mailing Address: Current Mailing Address:** JILL C. MCCRORY JILL C. MCCRORY 99 NESBIT STREET 331 SULLIVAN STREET PUNTA GORDA, FL 33950 PUNTA GORDA, FL 33950 FEI Number: 34-2039136 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCRORY, JILL C MCCRORY, JILL C 99 NESBIT STREET 331 SULLIVAN STREET PUNTA GORDA, FL 33950 MIZELL LAW FIRM, P.A US PUNTA GORDA, FL 33950 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: 04/30/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CALLWOOD, ANNA M Name: Name: 211 WOOD STREET Address: Address: City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: () Delete VPD Title: Title: () Change () Addition REESE. ROOSEVELT Name: Name: 211 WOOD STREET Address: Address: PUNTA GORDA, FL 33950 City-St-Zip: City-St-Zip: Title: Title: TD () Delete () Change () Addition HILL, ROSCOE Name: Name: 211 WOOD STREET Address: Address: City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: Title: ATD () Delete Title: () Change () Addition MILLINER, SONJA Name: Name: Address: 211 WOOD STREET Address: City-St-Zip: City-St-Zip: PUNTA GORDA, FL 33950 Title: SD Title: () Delete () Change () Addition Name: THOMAS, ISAAC Name: 211 WOOD STREET Address: Address: City-St-Zip: PUNTA GORDA, FL 33950 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: JILL C. MCCRORY RA 04/30/2009