## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P05000052795

City-St-Zip:

BAGDAD, FL 32530

FILED Apr 02, 2009 Secretary of State

Entity Name: ALBANESE DEVELOPMENT, INC.					
Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
4555 SIMPSON STREET BOX 709 BAGDAD, FL 32530			BOX 832	4555 SIMPSON STREET BOX 832 BAGDAD, FL 32530	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
PO BOX 709 BAGDAD, FL 32530			PO BOX 832 BAGDAD, FL 325	PO BOX 832 BAGDAD, FL 32530	
FEI Number:	20-2642456	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
4555 SIMP PO 709 BAGDAD, The above	E, CHARLES SON STREET FL 32530 US named entity:		4555 SIMPSON S' PO 832 BAGDAD, FL 325	ALBANESE, CHARLES 4555 SIMPSON STREET PO 832 BAGDAD, FL 32530 US of changing its registered office or registered agent, or both,	
SIGNATURE:				04/02/2009	
Electronic Signature of Registered Agent			nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSD ( ) ALBANESE, CH 4555 SIMPSON BAGDAD, FL 3	STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( ) ALBANESE, TH 4555 SIMPSON BAGDAD, FL 3	STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	VP ( ) MILLER, SALL' 4555 SIMPSON		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: CHARLIE ALBANESE Ρ 04/02/2009