


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90040 014 ***150.00

DOCUMENT # P05000055793			
1. Entity Name GROUND FORCE DEVELOPMENT, INC.			
Principal Place of Business 2831 RINGLING BLVD. D113 SARASOTA, FL 34237		Mailing Address 2831 RINGLING BLVD. D113 SARASOTA, FL 34237	
2. Principal Place of Business 1195 SUNLIGHT COURT		3. Mailing Address 1195 SUNLIGHT COURT	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State ST. CLOUD FLORIDA		City & State ST. CLOUD FLORIDA	
Zip 34771		Country U.S.A.	
4. FEI Number 20-3947218		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BAKER, GARRY 2831 RINGLING BLVD. D113 SARASOTA, FL 34237		7. Name and Address of New Registered Agent Name R. NIGEL MILLS Street Address (P.O. Box Number is Not Acceptable) 1195 SUNLIGHT COURT City ST. CLOUD FL Zip Code 34771	
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: <i>R. Nigel Mills</i> R. NIGEL MILLS. 02/09/2006 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BAKER, GARRY 2831 RINGLING BLVD., SUITE D113 SARASOTA, FL 34237 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MILLS R. NIGEL 1195 SUNLIGHT COURT ST. CLOUD FL 34771 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <i>R. Nigel Mills</i> R. NIGEL MILLS		02/09/2006 (407)892-5648	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	