



2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAR 14 PH 2:44

DOCUMENT # P05000056131 1. Entity Name SEMINOLE DEVELOPMENT II, INC.					
Principal Place of Business 2001 NW 107 AVE MIAMI, FL 33172-2507			Mailing Address 2001 NW 107 AVE MIAMI, FL 33172-2507		
2. Principal Place of Business 5300 W. CYPRESS ST Suite, Apt. #, etc. STE 200		3. Mailing Address 5300 W. CYPRESS ST Suite, Apt. #, etc. STE. 200			
City & State TAMPA, FL		City & State TAMPA, FL		4. FEI Number 20-2733111	
Zip 33607		Country US		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410				7. Name and Address of New Registered Agent Name BECKY S. SCHAFFER Street Address (P.O. Box Number is Not Acceptable) 5300 W. CYPRESS STREET, STE 200 City TAMPA FL Zip Code 33607	
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 <u><i>Becky S. Schaffer</i></u> DATE <u>3/8/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees 300068559743 03/24/06--01006--002 **70.00			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SHEARER, JOHN S 2001 NW 107 AVE MIAMI, FL 331722507	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 482 SOUTH KELLER ROAD ORLANDO, FL 32810-6101	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZUMWALT, JOHN B 2001 NW 107 AVE MIAMI, FL 331722507	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5300 W. CYPRESS ST, STE 200 TAMPA, FL 33607	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS KENNER, TODD 2001 NW 107 AVE MIAMI, FL 331722507	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2270 CORPORATE CIRCLE, STE 100 HENDERSON, NV 89074-7755	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PAULSEN, ROBERT J 2001 NW 107 AVE MIAMI, FL 331722507	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 482 SOUTH KELLER ROAD ORLANDO, FL 32810-6101	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT VRANA, DONALD J 2001 NW 107 AVE MIAMI, FL 33172	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5300 W. CYPRESS ST, STE. 200 TAMPA, FL 33607	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u><i>Donald J. Vrana</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			DONALD J. VRANA CFO 316/6813-282-7275 <small>Date Daytime Phone #</small>		