

2006 FOR PROFIT CORPORATION ANNUAL REPORT

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SECRET
TALLAHASSEE, FLORIDA

DOCUMENT # P05000088205					
1. Entity Name BREEDLOVE DEVELOPMENT OF FLORIDA, INC.					
Principal Place of Business STE 211,355 BROGDON RD SUWANNEE, GA 30024			Mailing Address STE 211,355 BROGDON RD SUWANNEE, GA 30024		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
4. FEI Number 20-3835153				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STANFORD, DOUGLAS G 50 N LAURA ST STE 2200 JACKSONVILLE, FL 30002				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$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	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition	
			CEO-CHIEF EXECUTIVE OFFICER N. Wade Beavers 355 Brogdon Rd, Suite 211 Suwannee, GA 30024		
			P- President Keith R. Breedlove 355 Brogdon Rd, Suite 211 Suwannee, GA 30024		
			VP-Vice President Edward R. Breedlove 355 Brogdon Rd, Suite 211 Suwannee, GA 30024		
			S- Secretary Lynn B. Pass 355 Brogdon Rd, Suite 211 Suwannee, GA 30024		
			T-Treasurer Wayne O. Norris 355 Brogdon Rd, Suite 211 Suwannee, GA 30024		
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>Lynn B. Pass - Lynn B. Pass - Secretary</u> 01-04-06 (779) 445-7327					