

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000143831

**FILED**  
**Feb 25, 2007**  
**Secretary of State**

**Entity Name:** NORTHWOOD DEVELOPMENT GROUP, INC.

**Current Principal Place of Business:**

1708 COUNTRY TRAILS DR  
SAFETY HARBOR, FL 34695

**New Principal Place of Business:**

**Current Mailing Address:**

1708 COUNTRY TRAILS DR  
SAFETY HARBOR, FL 34695

**New Mailing Address:**

**FEI Number:** 20-3795409

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HAYMAN, STEPHEN D ESQ.  
412 E. MADISON ST.  
STE. 1111  
TAMPA, FL 33602 US

**Name and Address of New Registered Agent:**

HAYMAN, STEPHEN D ESQ.  
6605 GUNN HIGHWAY  
TAMPA, FL 33625 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: STEPHEN D HAYMAN

02/25/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LOLLEY, RANDALL  
Address: 1708 COUNTRY TRAILS DRIVE  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DS ( ) Delete  
Name: SHORT, LEARY C  
Address: 900 N.W. SNUG HARBOUR RD.  
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: D ( ) Delete  
Name: ALLEN, TOMMY G  
Address: P.O. BOX 2923  
City-St-Zip: YAKIMA, WA 98907

Title: D ( ) Delete  
Name: SKOV, H GARY  
Address: P.O. BOX 2923  
City-St-Zip: YAKIMA, WA 98907

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RANDALL LOLLEY

MM

02/25/2007

Electronic Signature of Signing Officer or Director

Date