


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 30, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P05000145092**  
 1. Entity Name  
**CORE DEVELOPMENT SOLUTIONS INC**



Principal Place of Business 500 N WILLOW AVE SUITE 101 TAMPA, FL 33606 US	Mailing Address 500 N WILLOW AVE SUITE 101 TAMPA, FL 33606 US
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04222008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-3692666	Applied For Not Applicab
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**  
 WILKINSON, CAROLYN  
 500 N WILLOW AVE  
 SUITE 101  
 TAMPA, FL 33606

**DO NOT WRITE IN THIS SPACE**

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 *Carolyn Wilkinson* (NOTE: Registered Agent signature required when reinstating) DATE 4/22/08

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000833072  
 05/22/08-80082-009 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILKINSON, CAROLYN 2402 BRISTOL AVE TAMPA, FL 33609
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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 *Carolyn Wilkinson*

16-37-08