2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000163318

City-St-Zip:

Entity Name: ONSITE DEVELOPMENT GROUP INC.

FILED Sep 05, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1616 SMITHFIELD WAY 2612 MT ROYAL PL **SUITE 1072** CHULUOTA, FL 32766 OVIEDO, FL 32765 **New Mailing Address: Current Mailing Address:** 1616 SMITHFIELD WAY 2612 MT ROYAL PL CHULUOTA, FL 32766 **SUITE 1072** OVIEDO, FL 32765 FEI Number: 20-3943899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KAPLAN, DAVID 2612 MOUNT ROYAL PLACE CHULUOTA, FL 32766 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRES () Delete Title: () Change () Addition Name: KAPLAN, DAVID Name: 2612 MOUNT ROYAL PLACE Address: Address: City-St-Zip: CHULUOTA, FL 32766 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: LWIN, MICHAEL T Address: Address: 9831 NONA CREST DR

ORLANDO, FL 32837

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: M T LWIN OFC 09/05/2008