2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21, 2008 8:00 am Secretary of State

| Piercopie Place of Business - No P.O. Box # 30 SUMMERWINDS LANE INPTER_FL 33438 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Business - No P.O. Box # 3. Mailing Address Business - No P.O. Box # 3. Mailing Address Business - No P.O. Box # 3. Mailing Address Business - No P.O. Box # 3. Mailing Address Business - No P.O. Box # 3. Mailing Address Business - No P.O. Box # 3. Mailing Address Business - No P.O. Box # 3. Mailing Address Business - No P.O. Box # 3. Mailing Address Business - No P.O. Box # 3. Mailing Address Business - No P.O. Box # 4. FEI Number December | DOCUMENT # P05000168490 1. Entity Name EXPRESS DEVELOPMENT, INC. | | | 04-21-2008 | 3 90094 044 ***1 | 50.00 | |
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| 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 3.20 | Principal Place of Business Mailing Address | |] | | | | |
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| 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 10. Normo 8. The above named entity submits into 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 registeryd agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 9. Election Compaign Financing Full Fund Contribution. Added to Fees Added to Fees Added to Fees JUPITER, FL 33458 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIBLE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO | City & State State State | Sity & State Sper, TX | | 091 | | • | |
| North Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable (P.O. Box Number is Not Acce | Zip Country Zip 5078 CC | | 5. Certificate o | f Status Desired | | | |
| TIBBETTS. THOMAS P. IV 302 SUMMERWINDS LANE JUPITER, FL 33458 8. The above named entity submits this statement for the purpose of changing its registered diffee or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fl | 6. Name and Address of Current Registered Agent | | 7. Name and A | ddress of New R | tegistered Agent | | |
| Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | TIRRETTS THOMAS D IV | Name | | | | | |
| 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. Lem lamiliar with, and accept the obligations of registered agent, and the following agent. SIGNATURE | 302 SUMMERWINDS LANE | SUMMERWINDS LANE Street Address | | P.O. Box Number is Not Acceptable) | | | |
| 8. The above named entity submits this statement for the purpose of changing its registered algent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE | | | | | | | |
| SIGNATURE Signature Desire Desir | | City | | | FL Zip Cod | e | |
| FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 12. TITLE NOW!! FEE IS \$150.00 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 15. S 16. Change Addition NAME 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 16. Change Addition NAME 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 16. Change Addition NAME 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 16. Change Addition NAME 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 16. Change Addition NAME 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 16. Change Addition NAME 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 16. Change Addition NAME 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 16. Change Addition NAME 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 18. ADDITIONS/CHANGES TO OFF | | tered office or registe | red agent, or both | , in the State of Flo | orida. I am familiar with, | and accept | |
| NOTE Repailed in protect does de displaced Lagreta and later Cause (NOTE Repail agrature required when terestains) DATE | Thomas Theta De | Paci | dont | | 7/20/1 | e | |
| ### After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees | SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Regis | stere I Agent signature requires | when reinstating) | | DATE | <i></i> | |
| TITLE NAME STREEL ADDRESS CITY-ST-2PP TIBBETTS, THOMAS P IV 302 SUMMERWINDS LANE JUPITER, FL 33458 STREEL ADDRESS CITY-ST-2PP TIBBETTS, KRISTINE M 302 SUMMERWINDS LANE JUPITER, FL 33458 TIBBETTS, KRISTINE M 302 SUMMERWINDS LANE JUPITER, FL 33458 TIBBETTS, KRISTINE M 302 SUMMERWINDS LANE JUPITER, FL 33458 TIBBETTS, KRISTINE M 302 SUMMERWINDS LANE JUPITER, FL 33458 TIBBETTS, KRISTINE M 302 SUMMERWINDS LANE JUPITER, FL 33458 TIBBETTS, KRISTINE M 304 Change Addition NAME STREET ADDRESS CITY-ST-2PP TIBBETTS, KRISTINE M 302 SUMMERWINDS LANE JUPITER, FL 33458 TIBBETTS, KRISTINE M 302 SUMMERWINDS LANE JUPITER, FL 33458 TIBBETTS, KRISTINE M 302 SUMMERWINDS LANE JUPITER, FL 33458 TIBBETTS, KRISTINE M 304 Change Addition NAME STREET ADDRESS CITY-ST-2PP TIBBETTS, THOMAS P IV NAME TIBLE NAME | FIEL HOWEN FEE 13 9 130.00 | | | | | | |
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| 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information | STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS | STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP | | | Change | Addition | |

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: