

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000029080

Entity Name: ANM DEVELOPMENT, INC.

FILED
Apr 10, 2008
Secretary of State

Current Principal Place of Business:

6100 STEVENSON DR.
#204
ORLANDO, FL 32835 US

New Principal Place of Business:

Current Mailing Address:

21428 81ST STREET
BRISTOL, WI 53104 US

New Mailing Address:

19033 101ST STREET
BRISTOL, WI 53104 US

FEI Number: 72-1612622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, ADAM G
6100 STEVENSON DR
#204
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: ANDERSON, ADAM G
Address: 21428 81ST STREET
City-St-Zip: BRISTOL, WI 53104 US

Title: VP () Delete
Name: MOLGAARD, JAKE
Address: 16809 GLENBROOK BLVD.
City-St-Zip: CLERMONT, FL 34714 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANDERSON, ADAM G
Address: 19033 101ST STREET
City-St-Zip: BRISTOL, WI 53104 US

Title: () Change () Addition
Name:
Address:
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: ADAM ANDERSON

PRES

04/10/2008

Electronic Signature of Signing Officer or Director

Date