

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000053394

Entity Name: CBN DEVELOPMENT, INC.

FILED  
Sep 15, 2008  
Secretary of State

## Current Principal Place of Business:

1703 SEABREEZE AVE  
JACKSONVILLE BEACH, FL 32250

## New Principal Place of Business:

## Current Mailing Address:

1703 SEABREEZE AVE  
JACKSONVILLE BEACH, FL 32250

## New Mailing Address:

FEI Number: 13-4331811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PILINKO, CHRISTOPHER  
1703 SEABREEZE AVE  
JACKSONVILLE BEACH, FL 32250 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WESTBROOK, NORMAN  
Address: 4912 CERISE STREET  
City-St-Zip: JACKSONVILLE, FL 32252

Title: V ( ) Delete  
Name: PILINKO, CHRISTOPHER  
Address: 1703 SEABREEZE AVE  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: V ( ) Delete  
Name: PILINKO, BRADLEY  
Address: 838 PHEASANT COURT  
City-St-Zip: SWITZERLAND, FL 32259

## 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:

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: CHRISTOPHER PILINKO

V

09/15/2008

Electronic Signature of Signing Officer or Director

Date