

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000069804

FILED
Apr 30, 2009
Secretary of State

Entity Name: ANCHORITE DEVELOPMENT CORPORATION

Current Principal Place of Business:

4545 HEAVENS WAY
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

1334 TAMPA RD.
SUITE 701
PALM HARBOR, FL 34683

Current Mailing Address:

4545 HEAVENS WAY
NEW PORT RICHEY, FL 34652

New Mailing Address:

1334 TAMPA RD.
SUITE 701
PALM HARBOR, FL 34683

FEI Number: 26-1151153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALVERDE, JOSEPH F
4545 HEAVENS WAY
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

VALVERDE, JOSEPH F
1334 TAMPA RD
SUITE 701
PALM HARBOR, FL 34683 US

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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: VALVERDE, JOSEPH F
Address: 4545 HEAVENS WAY
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: VALVERDE, JOSEPH F
Address: 1334 TAMPA RD SUITE 701
City-St-Zip: PALM HARBOR, FL 34683

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: JOSEPH F. VALVERDE

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date