2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000113843

FILED May 01, 2008 Secretary of State

Entity Name: RESOURCE DEVELOPMENT ASSOCIATES COMPANY

Current Principal Place of Business: New Principal Place of Business: 921 AGNES SCOTT CIRCLE 921 AGNES SCOTT CIRCLE PANAMA CUTY, FL 324053800 PANAMA CITY, FL 324053800 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 648 PANAMA CITY, FL 324020648 FEI Number: 02-0785583 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: PARIS, MARK 921 AGNES SCOTT CIRCLE PANAMA CUTY, FL 324053800 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete (X) Change () Addition PARIS, CLAIRE B Name: Name: PARIS, MARK J 121 FEN WAY 921 AGNES SCOTT CIRCLE Address: Address: City-St-Zip: PEACHTREE CITY, GA 302692910 City-St-Zip: PANAMA CITY, FL 32405 Title: Title: (X) Delete () Change () Addition Name: PARIS, ROSS J Name: Address: Address: 121 FEN WAY PEACHTREE CITY, GA 302692910 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition MCCLURE, BRENDA P Name: Name: 102 LOBLOLLY CIRCLE Address: Address: PEACHTREE CITY, GA 302692036 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition PARIS, SUSAN K Name: Name: Address: 621 OAK RIDGE COURT WEST Address: City-St-Zip: DAPHNE, AL 365264614 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: PARIS, MARK Name: 921 AGNES SCOTT CIRCLE Address: Address: City-St-Zip: PANAMA CUTY, FL 324053800 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: MARK PARIS DIR 05/01/2008