

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000027378

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: COURTNEY ISLES DEVELOPMENT, INC.

## Current Principal Place of Business:

100 COLONIAL CENTER PARKWAY SUITE 470  
LAKE MARY, FL 32746

## New Principal Place of Business:

## Current Mailing Address:

100 COLONIAL CENTER PARKWAY SUITE 470  
LAKE MARY, FL 32746

## New Mailing Address:

FEI Number: 20-8558871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CORPORATION COMPANY OF ORLANDO  
300 S ORANGE AVE SUITE 1000 (DTO)  
ORLANDO, FL 328015403 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: OGIER, GERALD D  
Address: 100 COLONIAL CTR PKWY 470  
City-St-Zip: LAKE MARY, FL 32746

Title: VTS ( ) Delete  
Name: SCHAFFER, JOHN  
Address: 100 COLONIAL CENTER PRKWY 470  
City-St-Zip: LAKE MARY, FL 32746

Title: V ( ) Delete  
Name: OGIER, MARK  
Address: 100 COLONIAL CENTER PKWY 470  
City-St-Zip: LAKE MARY, FL 32746

Title: V ( ) Delete  
Name: OGIER, STEVEN  
Address: 100 COLONIAL CTR PKWY 470  
City-St-Zip: LAKE MARY, FL 32746

## 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:

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: JOHN SCHAFFER

VP

01/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date