P07000052593

. (Re	equestor's Name)	_
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	<i>⇒ #</i>)
PICK-UP	MAIT WAIT	MAIL
•		
	ısiness Entity Nar	ne)
(20	Johnson Emity Har	,
(D)	ocument Number)	
(50	ocument Number)	
0 10 10	0	101.4
Certified Copies	_ Certificates	or Status
Special Instructions to	Filing Officer:	
		·

Office Use Only



000176318700

04/20/10--01013--012 **245.00



or Malsier

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	Orlando Development Co Name of Corp	onstruction Corp
DOCUMENT NU	MBER: P0700	0052593
The enclosed States	ment of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all co	rrespondence concerning this matter to	the following:
	Phillip D. H Name of Contac	arper et Person
Orlando Development Construction Corp		
	Firm/Comp	any
	7921 Lake Ne	- · · · · · · · · · · · · · · · · · · ·
	Address	S
	Clermont, FL City/State and 2	34714
	City/State and 2	ip code
_	phd@orldevcor E-mail address: (to be used for futu	nst.com re annual report notification)
For further informa	tion concerning this matter, please call	:
Nan	Phillip D Harper ne of Contact Person	at (407) 451-3658 Area Code & Daytime Telephone Number
Enclosed is a \$35.0	0 check made payable to the Departme	nt of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.		
1. The name of the corporation: Orlando Dev			
2. The principal office address: 7921 Lake Nel	lie Road, Clermont FL. 34714		
3. The mailing address (if different): same as a	bove		
4. Date of incorporation/qualification: 05/01	/2007 Document number: P07000052593		
5. The name and street address of the current regis Florida Department of State: (If resigned, enter			
John Suglio- resigned	TAS =		
2651 Guiana Plum Dr.	CLAPI		
Orlando, FL. 32828	APR 20 LAHASSE		
6. The name and street address of the new register (if changed):	ed agent (if changed) and /or registered office		
Phillip D. Harper	53 NEW AND THE STATE OF THE STA		
7921 Lake Nellie Road			
P.O. Clermont, FL. 34714	Box NOT acceptable		
	street address of the business office of its registered agent,		
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.			
Phillip D. Harper-President			
Signature of an orner or director I hereby accept the appointment as registered as I further agree to comply with the provisions of of my duties, and I am familiar with and accept accument is being filed mereby to reflect a chang for population has been notified in writing of this components.	gent and agree to act in this capacity. The proper and complete performance the obligation of my position as registered agent. Or, if this is in the registered office address, I hereby confirm that the hange.		
Signature of Registered Agent If signing on behalf of an entity:	Date		
Philip O. Hacels Typed or Printed Name	-		

* * * FILING FEE: \$35.00 * * *