

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000054465

FILED
Apr 28, 2009
Secretary of State

Entity Name: FLORIDA DEVELOPMENT CONTRACTORS, INC.

Current Principal Place of Business:

4435 SW 110TH ST.
OCALA, FL 34476

New Principal Place of Business:

1823 SE FORT KING STREET
SUITE 201
OCALA, FL 34471

Current Mailing Address:

PO BOX 4566
OCALA, FL 34478

New Mailing Address:

FEI Number: 20-8986232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALEY, DONNA L
4435 SW 110TH ST.
OCALA, FL 34476 US

Name and Address of New Registered Agent:

HALEY, DONNA L
4886 SW 110TH ST.
OCALA, FL 34476 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:

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HALEY, DONNA L
Address: 4435 SW 110TH ST.
City-St-Zip: Ocala, FL 34476 US

Title: SEC () Delete
Name: STERNER, CHRISTOPHER M
Address: 4435 SW 110TH ST.
City-St-Zip: Ocala, FL 34476 US

Title: VP () Delete
Name: STERNER, DAVID J
Address: 4913 NW 64TH BLVD
City-St-Zip: Gainesville, FL 32653 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HALEY, DONNA L
Address: 4886 SW 110TH ST.
City-St-Zip: Ocala, FL 34476 US

Title: SEC (X) Change () Addition
Name: STERNER, CHRISTOPHER M
Address: 4886 SW 110TH ST.
City-St-Zip: Ocala, FL 34476 US

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: DONNA HALEY

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date