

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000033733

FILED
Apr 16, 2009
Secretary of State

Entity Name: SP ONE DEVELOPMENT, INC.

Current Principal Place of Business:

1205 WEST SWANN AVENUE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

1205 WEST SWANN AVENUE
TAMPA, FL 33606

New Mailing Address:

FEI Number: 26-2314166

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESSINGER, DAVID A
150 WEST FLAGLER STREET
MUSEUM TOWN, SUITE 2200
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

KOEHLER, DEBRA F
1205 W. SWANN AVENUE
TAMPA, FL 33606 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: DEBRA F. KOEHLER

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT () Change (X) Addition
Name: KOEHLER, DEBRA F
Address: 1205 W. SWANN AVENUE
City-St-Zip: TAMPA, FL 33606 US

Title: VP,S () Change (X) Addition
Name: TURNER, TODD S
Address: 1205 W. SWANN AVENUE
City-St-Zip: TAMPA, FL 33606 US

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: DEBRA F. KOEHLER

PRES

04/16/2009

Electronic Signature of Signing Officer or Director

Date