

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40740

FILED
Mar 10, 2009
Secretary of State

Entity Name: FORWARD DEVELOPMENT, INC.

Current Principal Place of Business:

128 SOUTH TRYON STREET, SUITE 900
CHARLOTTE, NC 28202

New Principal Place of Business:

Current Mailing Address:

128 SOUTH TRYON STREET, SUITE 900
CHARLOTTE, NC 28202

New Mailing Address:

FEI Number: 56-1761012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., STE. 4
WESTON, FL 33331 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: PDC () Delete
Name: WALKER, KENNETH D
Address: 128 S. TRYON ST., #900
City-St-Zip: CHARLOTTE, NC 28202

Title: TASD () Delete
Name: CARLET, MIKE
Address: 128 S. TRYON ST., #900
City-St-Zip: CHARLOTTE, NC 28202

Title: VSD () Delete
Name: PEARCE, TED P
Address: 128 S. TRYON ST., #900
City-St-Zip: CHARLOTTE, NC 28202

Title: VATD () Delete
Name: STREET, MARK
Address: 128 S. TRYON ST., #900
City-St-Zip: CHARLOTTE, NC 28202

Title: D (X) Delete
Name: AMOS, JAMES JR
Address: 3660 BEAR CREEK ROAD
City-St-Zip: THOMPSONS STATION, TN 37179

Title: D (X) Delete
Name: ROSS, EDWARD
Address: 1167 ASBURY AVENUE
City-St-Zip: WINNETKA, IL 60093

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TASD (X) Change () Addition
Name: CARLET, MICHAEL
Address: 128 S. TRYON ST., #900
City-St-Zip: CHARLOTTE, NC 28202

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VAT (X) Change () Addition
Name: STREET, MARK
Address: 128 S. TRYON ST., #900
City-St-Zip: CHARLOTTE, NC 28202

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: TED P. PEARCE

VSD

03/10/2009

Electronic Signature of Signing Officer or Director

Date