## , 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## FILED Jan 09, 2008 08:00 AN Secretary of State

•	ANNUAL	REPORT	
DOCUMENT#	P92000008	667	

1. Entity Name

UDG DEVELOPMENT CORP.



Principal Place of Business

1770 N. WICKHAM RD. MELBOURNE, FL 32935 US Mailing Address

1770 N. WICKHAM RD. MELBOURNE, FL 32935 US



01062008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3153023

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KANE,, DONALD L 1324 HWY A1A SATELLITE BEACH, FL 32937

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	E BEACH, FL 32937				IIS SPA		1.7
the obligati	named entity submits this statement for the pions of registered agent.  Signalure, typed or printed name of registered agent and title of		ed affice or register		n the State of Florida	. I am familiar with, a	nd accept
	E NOW!!! FEE IS \$150.00 by 1, 2008 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.		00 May Be ed to Fees	· .		
TOTLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT D KANE, DONALD L 1324 HWY A1A SATELLITE BEACH, FL 32937	CTORS				76838 4 4 4 7 100 100 100 100 100 100 100 100 100 1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERKLEY, THOMAS A. 1770 N. WICKHAM ROAD MELBOURNE, FL						J. UU
NAME STREET ADDRESS CHY-ST-ZIP					IOT WE	Jahr 433 Jahr 1	
TITLE NAME STREET ADDRESS GITY-ST-ZIP					HIS SPA	(CE)	
NAME STREET ADDRESS CITY+ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby	certify that the information supplied with this f	iling does not qualify for the ex-	emptions contained	in Chapter 119, F.	lorida Statutes. I fur	ther certify that the in	formation

referely enter the information supplies with this limit does not quanty to the exemptions contained at Chapter 119, Florida Statutes. Further certify that the mind does not quanty to the exemptions contained at Chapter 119, Florida Statutes. Further certify 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #