

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000004471

FILED
Apr 13, 2009
Secretary of State

Entity Name: WAGNER DEVELOPMENT, INC.

Current Principal Place of Business:

5940 GULF OF MEXICO DR
LONGBOAT KEY, FL 34228 US

New Principal Place of Business:

Current Mailing Address:

5940 GULF OF MEXICO DR
LONGBOAT KEY, FL 34228 US

New Mailing Address:

FEI Number: 65-0475553 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROLF-JURGEN, WAGNER
5940 GULF OF MEXICO DR
LONGBOAT KEY, FL 34228 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: P () Delete
Name: WAGNER, ROLF-JURGEN
Address: 5940 GULF OF MEXICO DR
City-St-Zip: LONGBOAT KEY, FL 34228

Title: SV () Delete
Name: WAGNER, GABRIELA
Address: 5940 GULF OF MEXICO DR
City-St-Zip: LONGBOAT KEY, FL 34228

Title: TR () Delete
Name: WAGNER, OLIVER
Address: 1360 SILVERSMITH DR
City-St-Zip: OAKVILLE, ON L6M-2X4

Title: D () Delete
Name: WAGNER, ALEXANDER
Address: 412 GOLD MINE DRIVE
City-St-Zip: SAN FRANCISCO, CA 94131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ROLF-JUERGEN WAGNER

P

04/13/2009

Electronic Signature of Signing Officer or Director

_____ Date