2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000037921

Entity Name: PROPERTY DEVELOPMENT & MANAGEMENT, INC.

FILED Mar 15, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

1150 JETPORT DRIVE ORLANDO, FL 32809

Current Mailing Address: New Mailing Address:

1150 JETPORT DRIVE ORLANDO, FL 32809

FEI Number: 59-3193370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

OLESEN, PREBEN

1150 JETPORT DRIVE
ORLANDO, FL 32809 US

OLESEN, DARLA
1150 JETPORT DRIVE
ORLANDO, FL 32809 US

ORLANDO, FL 32809 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: DARLA OLESEN 03/15/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP () Delete Title: CP (X) Change () Addition Name: OLESEN, PREBEN Name: OLESEN, DARLA

 Name:
 OLESEN, PREBEN
 Name:
 OLESEN, DARLA

 Address:
 1150 JETPORT DRIVE
 Address:
 1150 JETPORT DRIVE

 City-St-Zip:
 ORLANDO, FL 32809
 City-St-Zip:
 ORLANDO, FL 32809

Title: ST (X) Delete Title: () Change () Addition

 Name:
 OLESEN, DARLA
 Name:

 Address:
 1150 JETPORT DRIVE
 Address:

 City-St-Zip:
 ORLANDO, FL 32809
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DARLA OLESEN CP 03/15/2007