2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000074840

1. Entity Name

REDÉVELOPMENT PARTNERS, INCORPORATED



Principal Place of Business

5401 W KENNEDY BLVD

SUITE 751 TAMPA, FL 33609 Mailing Address

C/O GREG MORRIS 2325 ULMERTON RD, SUITE 20 CLEARWATER, FL 33762 US

FILED Mar 24, 2006 8:00 am Secretary of State

03-24-2006 90022 014 ***150.00

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03142006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3208036

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REDEVLOPMENT PARTERNS INC. C/O GREG MORRIS 2325 ULMERTON RD, SUITE 20 CLEARWATER, FL 33762

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The above harried entity submits this statement for the purpose of the	anging its registered unice or registered agent, or but	it, in the State of Florida. Tantitaninal with, and accept
the obligations of registered agent.		, ,
M8746		3/21/06
SIGNATURE		
Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE

FILE NOW!!! FEE.IS \$150.00 After May 1, 2006 Fee will be \$550.00

 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. VPST TITLE WOOD, RENE M NAME STREET ADDRESS 5401 W KENNEDY BLVD SUITE 751 TAMPA, FL 33609 CITY-ST-ZIP PD TITLE NAME BULLARD, FRED B JR STREET ADDRESS 2325 ULMERTON ROAD., SUITE 20 CITY-ST-ZIP CLEARWATER, FL 33762 TITLE MCNEEL, VAN L NAME STREET ADDRESS 5401_W KENNEDY BLVD., SUITE 751 CITY-ST-ZIP TAMPA, FL 33609 VΡ 71TLE MORRIS, GREG NAME STREET ADDRESS 2325 ULMERTON RD STE 20 CLEARWATER, FL 33762 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

3/21/06

727.576.6424

Date

Daytime Phone #