2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# P93000087910

Entity Name: PIER B DEVELOPMENT CORP.

Current Principal Place of Business:

245 FRONT STREET
STE 102
KEY WEST, FL 33040 US

New Principal Place of Business:

Current Mailing Address:

1000 MARKET ST
BLDG 1
PORTSMOUTH, NH 03801 US

New Mailing Address:

FEI Number: 65-0478846 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION INFORMATION SERVICES INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: WALSH, MARK
Address: 1001 E. ATLANTIC AVE., SUITE 202
City-St-Zip: DELRAY BEACH, FL

Title: VT ( ) Delete
Name: WALSH, MICHAEL
Address: 1001 E. ATLANTIC AVE., SUITE 202
City-St-Zip: DELRAY BEACH, MF

Title: V ( ) Delete
Name: WALSH, WILLIAM
Address: 1000 MARKET ST BLDG `
City-St-Zip: PORTSMOUTH, NH 03801

Title: V ( ) Delete
Name: MCMURRAIN, THOMAS T
Address: 1001 E. ATLANTIC AVE., SUITE 202
City-St-Zip: DELRAY BEACH, FL

Title: S ( ) Delete
Name: CRITCHFIELD, RICHARD H
Address: 1001 E. ATLANTIC AVE., SUITE 201
City-St-Zip: DELRAY BEACH, FL

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:

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: MARK WALSH P 02/05/2009

Electronic Signature of Signing Officer or Director Date