

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P95000022329</b>		
1. Entity Name <b>BAYOU DEVELOPMENT, INC.</b>		
Principal Place of Business <b>640 SOUNDVIEW DRIVE PALM HARBOR, FL 34683</b>		Mailing Address <b>640 SOUNDVIEW DRIVE PALM HARBOR, FL 34683</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>ALTMAN, ROGER W 640 SOUNDVIEW DRIVE PALM HARBOR, FL 34683</b>		01092006    No Chg-P    CR2E034 (11/05)
		4. FEI Number <b>59-3309630</b>
8. 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. I am familiar with, and accept the obligations of registered agent.		<input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
		<b>DO NOT WRITE IN THIS SPACE</b>
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
10. OFFICERS AND DIRECTORS		<div style="margin-bottom: 20px;">U00000409637 02/09/06-80003-017 150.00</div> <b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALTMAN, ROGER W 640 SOUNDVIEW DRIVE PALM HARBOR, FL 34683	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALTMAN, CAROL T 640 SOUNDVIEW DRIVE PALM HARBOR, FL 34683	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <u><i>Roger W. Altman</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>1/11/06</u> <small>Daytime Phone #</small>