2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000042626

Entity Name: OLYMBIC DEVELOPMENT CORPORATION

FILED Apr 03, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
27611 PLEASURE RIDE LOOP WESLEY CHAPEL, FL 33543 US	20012 RYMAN PLACE TAMPA, FL 33647 US
Current Mailing Address:	New Mailing Address:
27611 PLEASURE RIDE LOOP WESLEY CHAPEL, FL 33543 US	20012 RYMAN PLACE TAMPA, FL 33647 US
FEI Number: 59-3318174 FEI Number Applied For () FEI Number	umber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
PRIDA, ANDRES 1106 NORTH FRANKLIN STREET TAMPA, FL 33602 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:	
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: LANGAS, AGNI LANGAS, AGNI Name: Name: 19201 COLLINS AVE # 819 Address: 20012 RYMAN PLACE Address: City-St-Zip: SUNNY ISLES BEACH, FL 33160 US City-St-Zip: TAMPA, FL 33647 US Title: () Delete Title: (X) Change () Addition LANGAS, GEORGE D LANGAS, GEORGE D Name: Name: Address: 19201 COLLINS AVE # 819 Address: 27611 PLEASURE RIDE LOOP SUNNY ISLES BEACH, FL 33160 WESLEY CHAPEL, FL 33543 US City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition DCEO () Delete DCFO LANGAS, DIMITRIOS J Name: LANGAS, DIMITRIOS J Name: 19201 COLLINS AVE # 819 Address: 20012 RYMAN PLACE Address: City-St-Zip: SUNNY ISLES BEACH, FL 33160 US City-St-Zip: TAMPA, FL 33647 US

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

 Name:
 LANGAS, POLYXENI
 Name:
 LANGAS, POLYXENI

 Address:
 19201 COLLINS AVE #819
 Address:
 20012 RYMAN PLACE

 City-St-Zip:
 SUNNY ISLES, FL 33160 US
 City-St-Zip:
 TAMPA, FL 33647 US

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: DIMITRIOS J. LANGAS DCEO 04/03/2008