2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000091378

Entity Name: BDS DEVELOPMENT CORP.

SARASOTA, FL 34242

SARASOTA, FL 34242

MCCURDY, JEFF

(X) Delete

5111 OCEAN BLVD, SUITE C

DVP

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

FILED Apr 13, 2009 Secretary of State

-							
Current Principal Place of Business:				New Principal Place of Business:			
	EAN BLVD. A, FL 34242			5111 OCE SUITE C SARASOTA	AN BLVD. A, FL 3424	2	
Current Mailing Address:				New Mailing Address:			
	EAN BLVD. A, FL 34242			5111 OCE SUITE C SARASOTA	AN BLVD. A, FL 3424:	2	
FEI Number:	14-1788151	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
SIMON, JASPERS 5111 OCEAN BLVD STE C SARASOTA, FL 34242 US				SENTINEL MANAGEMENT LLC 5111 OCEAN BLVD SUITE C SARASOTA, FL 34242 US			
The above in the State		ubmits this statement for the p	urpose o	of changing i	ts registered	d office or registered agent, or both,	
SIGNATURE: SENTINEL MANGEMENT LLC				04/13/2009			
	Electronic	Signature of Registered Age	nt			Date	
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	S ()[HYMAN, ROSALI 5111 OCEAN BL SARASOTA, FL	VD SUITE C		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	DP () I MCCURDY, JEFI 5111 OCEAN BL			Title: Name: Address:	DP MCCURDY, 5111 OCEAI	(X) Change () Addition JEFF N BLVD. STE. F	

City-St-Zip: SARASOTA, FL 34242

() Change () Addition

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JEFFREY R. MCCURDY DP 04/13/2009