

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2004 8:00 am
Secretary of State

03-11-2004 90019 047 ***150.00

DOCUMENT # P96000031380 1. Entity Name FACILITY DEVELOPMENT CORPORATION																													
Principal Place of Business ONE ENTERPRISE WEST SANDERSON, FL 32087 US			Mailing Address 5627 FM 1960 WEST HOUSTON, TX 77069 US																										
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address 14925 Stuebner Airline Road Suite 307 HOUSTON, TX Zip Country 77069 USA		03012004 Chg-P CR2E034 (10/03) 4. FEI Number 59-2287668 Applied For Not Applicable																									
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525																											
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		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. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																											
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 another like empowered.																													
SIGNATURE: <u>Barry Ian King</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date: <u>3/5/4</u> Daytime Phone #: <u>281-880-5406</u>																									