

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90202 001 ***150.00

DOCUMENT # P96000057440

1. Entity Name
TRUST DEVELOPMENT CORPORATION, INC.



Principal Place of Business
114 NORTHEAST FIRST STREET
POST OFFICE BOX 308
TRENTON, FL 32693

Mailing Address
114 NORTHEAST FIRST STREET
POST OFFICE BOX 308
TRENTON, FL 32693



01062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3393324

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

THEODORE M. BURT, P.A.
114 NORTHEAST FIRST STREET
POST OFFICE BOX 308
TRENTON, FL 32693

**DO NOT WRITE
IN THIS SPACE**

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) _____ **DATE** _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DV
NAME	BURT, THEODORE M
STREET ADDRESS	114 NE 1ST ST., PO BOX 308
CITY-ST-ZIP	TRENTON, FL 32693
TITLE	PST
NAME	DELISI, KATHLEEN
STREET ADDRESS	6500 SE 50TH STREET
CITY-ST-ZIP	TRENTON, FL 32693
TITLE	AS
NAME	BURT, PAMELA D
STREET ADDRESS	114 NE FIRST STREET
CITY-ST-ZIP	TRENTON, FL 32693
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: **4/25/06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ **Date** _____ **Daytime Phone #** _____

ATTACHMENT 40063750
#P96000057440

THEODORE M. BURT, P.A.

Attorneys at Law
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Post Office Box 308
Trenton, Florida 32693

Theodore M. Burt
Patti Lee Meeks

(352) 463-2348
fax (352) 463-6908

April 25, 2006

Division of Corporations
Post Office Box 6478
Tallahassee, Florida 32614

Re: Trust Development Corporation, Inc.

Gentlemen:

Enclosed please find the 2006 Annual Report regarding the referenced corporation, together with a check in the amount of \$150.00 to cover the filing fee.

Yours truly,



Susan Thorsen
Legal Assistant

/st

Enclosures: Report
Check

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