## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000057440

Entity Name: TRUST DEVELOPMENT CORPORATION, INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

114 NORTHEAST FIRST STREET POST OFFICE BOX 308

TRENTON, FL 32693

114 NORTHEAST FIRST STREET

TRENTON, FL 32693

**Current Mailing Address:** 

New Mailing Address:

114 NORTHEAST FIRST STREET POST OFFICE BOX 308

TRENTON, FL 32693

FEI Number: 59-3393324

FEI Number Applied For ( )

FEI Number Not Applicable ( ) Ce

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: THEODORE M. BURT

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

 Title:
 DV
 ( ) Delete

 Name:
 BURT, THEODORE M

 Address:
 114 NE 1ST ST., PO BOX 308

City-St-Zip: TRENTON, FL 32693

 Title:
 PST ( ) Delete

 Name:
 DELISI, KATHLEEN

 Address:
 6500 SE 50TH STREET

 City-St-Zip:
 TRENTON, FL 32693

 Title:
 AS
 ( ) Delete

 Name:
 BURT, PAMELA D

 Address:
 114 NE FIRST STREET

 City-St-Zip:
 TRENTON, FL 32693

Title: PST (X) Change ( ) Addition

Name: DELISI, KATHLEEN
Address: 1058 ROARING FORK ROAD
City-St-Zip: HOT SPRINGS, NC 28743

Title: S (X) Change ( ) Addition

Name: BURT, PAMELA D Address: 114 NE FIRST STREET City-St-Zip: TRENTON, FL 32693

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: THEODORE M. BURT DV 04/26/2007