

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2006 8:00 am
Secretary of State

17

01-26-2006 90046 017 ***150.00

DOCUMENT # P96000083605

1. Entity Name
ANCHOR BAY DEVELOPMENT, INC.



Principal Place of Business
**11027 SO OCEAN DR
JENSEN BEACH, FL 34957 US**

Mailing Address
**3003 S.E. ST. LUCIE BLVD
STUART, FL 34997 US**

66002247



01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0732524

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**BRYAN, C JOSEPH
3003 SE ST LUCIE BLVD
STUART, FL 34997**

**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

Signature, typed or printed name of registered agent with title if applicable.

(NOTE: Registered Agent signature required when renewing)

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	DP
NAME	BRYAN, C. JOSEPH
STREET ADDRESS	3003 SE ST LUCIE BLVD
CITY-ST-ZIP	STUART, FL 34997
TITLE	S
NAME	BRYAN, SHARON H
STREET ADDRESS	3003 SE ST LUCIE BLVD
CITY-ST-ZIP	STUART, FL 34997
TITLE	VP
NAME	BRYAN, JAMES C
STREET ADDRESS	571 SW SQUIRE JOHNS LANE
CITY-ST-ZIP	PALMS CITY, FL 34990
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SECOND OFFICER OR DIRECTOR

DATE

Daytime Phone #

2/18/06

(772)-285-9517



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 31, 2006

ANCHOR BAY DEVELOPMENT, INC.
3003 S.E. ST. LUCIE BLVD
STUART, FL 34997 US

Subject: ANCHOR BAY DEVELOPMENT, INC.

Reference Number:

P96000083605

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/CC

ANNUAL REPORTS SECTION