2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000010173

Entity Name: E.D.C./EXCELSIOR DEVELOPMENT COMPANY

FILED Feb 04, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

2009 LONGWOOD-LAKE MARY ROAD 2009 LONGWOOD LAKE MARY ROAD

SUITE 1015 SUITE 1015

LONGWOOD, FL 32750 LONGWOOD, FL 32750

New Mailing Address: **Current Mailing Address:**

2009 LONGWOOD LAKE MARY ROAD 2009 LONGWOOD-LAKE MARY ROAD

SUITE 1015 SUITE 1015

LONGWOOD, FL 32750 LONGWOOD, FL 32750 US

FEI Number: 59-3428055 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MUNIZZI, E LEE MUNIZZI, E LEE 2009 LONGWOOD-LAKE MARK ROAD 2009 LONGWOOD LAKE MARY ROAD **SUITE 1015** SUITE 1015 LONGWOOD, FL 327503512 US LONGWOOD, FL 32750 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.

SIGNATURE: E LEE MUNIZZI 02/04/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title:

Name: MUNIZZI, AMY K Name: MUNIZZI, AMY K

2009 LONGWOOD-LAKE MARY RD., SUITE 1015 Address: 2009 LONGWOOD LAKE MARY RD STE 1015 Address:

City-St-Zip: LONGWOOD, FL 327503512 City-St-Zip: LONGWOOD, FL 32750 US

Title: (X) Change () Addition Title: () Delete

Name: MUNIZZI. LEE E Name: MUNIZZI. E LEE

2009 LONGWOOD-LAKE MARY RD, STE. 1015 2009 LONGWOOD LAKE MARY RD STE 1015 Address: Address: City-St-Zip:

LONGWOOD, FL 327503512 LONGWOOD, FL 32750 US City-St-Zip:

Title: (X) Change () Addition Title: D () Delete

MUNIZZI, JOHN Name: MUNIZZI, JOHN Name:

2009 LONGWOOD-LAKE MARY RD., SUITE 1015 Address: 2009 LONGWOOD LAKE MARY RD STE 1015 Address

City-St-Zip: LONGWOOD, FL 327503512 City-St-Zip: LONGWOOD, FL 32750 US

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: E LEE MUNIZZI D 02/04/2009