

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005 8:00 am
Secretary of State

01-27-2005 90047 001 ***150.00

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01142005 No Chg-P CR2E034 (10/03)

DOCUMENT # P97000027486
 1. Entity Name
THE BIG KAHUNA DEVELOPMENT COMPANY



Principal Place of Business 11300 FOURTH STREET N SUITE 200 ST. PETERSBURG, FL 33716 US	Mailing Address 11300 4TH ST N SUITE 200 ST. PETERSBURG, FL 33716 US
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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3433847	Applied For Not Applicable
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-5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 SEMBLER, M. STEVEN
 11300 FOURTH STREET NORTH
 SUITE 200
 ST. PETERSBURG, FL 33716

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SEMBLER, M. STEVEN 11300 FOURTH STREET NORTH, SUITE 200 ST. PETERSBURG, FL 33716
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS CHADWICK, JAMES M 11300 FOURTH STREET NORTH, SUITE 200 ST PETERSBURG, FL 33716
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KEENE, BRUCE R JR 11300 4TH ST. N.,STE.200 ST. PETERSBURG, FL 33716
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 all other like empowered.

SIGNATURE: **1/17/05** **727 577 9197**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
James M. Chadwick, Vice President