2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000062284

1. Entity Name
PETRA DEVELOPMENT, CORP.

Principal Place of Business	Mailing Address
2100 TRADE CENTER WAY SUITE D NAPLES, FL 34109	2100 TRADE CENTER WAY SUITE D NAPLES, FL 34109

DO NOT WRITE IN THIS SPACE

03132006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0772038
Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SKRIVAN, KENT A ESQ
801 LAUREL OAK DRIVE
SUITE 705
NAPLES, FL 34108

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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
Sign above, 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, 2006 Fee will be $550.00

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

000005111870
04/29/06-80065-018 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	MUSUMANO, PATSY
STREET ADDRESS	2100 TRADE CENTER WAY #D
CITY ST ZIP	NAPLES, FL 34109
TITLE	DVPS
NAME	MUSUMANO, DONNA M
STREET ADDRESS	2100 TRADE CENTER WAY, #D
CITY ST ZIP	NAPLES, FL 34109
TITLE	T
NAME	MUSUMANO, DONNA M
STREET ADDRESS	2100 TRADE CENTER WAY, #D
CITY ST ZIP	NAPLES, FL 34109
TITLE	DVP
NAME	MUSUMANO, JEFF
STREET ADDRESS	2100 TRADE CENTER WAY, #D
CITY ST ZIP	NAPLES, FL 34109
TITLE	DVP
NAME	MUSUMANO, GREG
STREET ADDRESS	2100 TRADE CENTER WAY, #D
CITY ST ZIP	NAPLES, FL 34109
TITLE	DVP
NAME	RADCLIFFE, PAUL
STREET ADDRESS	2100 TRADE CENTER WAY, #D
CITY ST ZIP	NAPLES, FL 34109

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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: Donna Musumano S.V.P. Sec. Treas. 4/3/06 594-7985
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #