2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P98000017154

1. Entity Name

MASTER DEVELOPMENT OF CENTRAL FLORIDA, INC.

FILED Apr 30, 2004 08:00 AM Secretary of State

Principal Place of Business

1053 MAITLAND CENTER COMMONS BLVD.

2ND FLOOR MAITLAND, FL 32751 Mailing Address

1053 MAITLAND CENTER COMMONS BLVD. 2ND FLOOR

MAITLAND, FL 32751



04262004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3518799 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WALKER, BERRY J JR 1053 MAITLAND CENTER COMMONS BLVD. 2ND FLOOR MAITLAND, FL 32751

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	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or re	egistered agent, or bot	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	applicable (NOTE Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing 🗀	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
NAME STREET ADDRESS CITY - ST - ZIP	PDST WALKER, BERRY J JR 1053 MAITLAND CENTER COMMONS MAITLAND, FL 32751	S BLVD., 2ND FL	Biggram of the distance		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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TITLE NAME STREET ADDRESS					

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:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ACR 28 2004

Daytime Phone #