2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000030516

Entity Name: Y DEVELOPMENT, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

240 S PINEAPPLE AVE ONE SOUTH SCHOOL AVENUE

10TH FLOOR SUITE 500

SARASOTA, FL 34236 SARASOTA, FL 34237

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 49948 1991 MAIN STREET, BOX 183

SARASOTA, FL 342306948 SARASOTA, FL 34236

FEI Number: 65-0826257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BAND, STEVEN C 1991 MAIN ST BOX 183

SARASOTA, FL 34236 US

BAND, STEVEN C 1991 MAIN STREET, BOX 183 SARASOTA, FL 34236 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: 04/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: BAND, DAVID S Name: BAND, DAVID S

Address: 240 S PINEAPPLE AVE, 10TH FLOOR Address: ONE SOUTH SCHOOL AVENUE, SUITE 500

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34237

Name: KANE, STANLEY B Name: KANE, STANLEY B

 Address:
 539 NORSTOA WAY
 Address:
 1991 MAIN STREET, BOX 183

 City-St-Zip:
 SARASOTA, FL 34242
 City-St-Zip:
 SARASOTA, FL 34236

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

 Name:
 KANE, DANIEL
 Name:

 Address:
 1127 WESTWAY DRIVE
 Address:

 City-St-Zip:
 SARASOTA, FL 34236
 City-St-Zip:

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.

D	04/28/2009
	D