

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000035253

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: MBNA LAND DEVELOPMENT CORP.

## Current Principal Place of Business:

831 RAILROAD ST. #10  
PORT ORANGE, FL 32119

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 354667  
PALM COAST, FL 32135

## New Mailing Address:

FEI Number: 59-3556112      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ALLMON, DONNA V  
30 WESTMORELAND DR.  
PALM COAST, FL 32164      US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RICHMOND, ROBERT W  
Address: 30 WESTMORELAND DR.  
City-St-Zip: PALM COAST, FL 32164

Title: VP ( ) Delete  
Name: ALLMON, DONNA V  
Address: 30 WESTMORELAND DR.  
City-St-Zip: PALM COAST, FL 32164

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: GARROW, ANGELA M  
Address: 108 LINDSAY DR  
City-St-Zip: PALM COAST, FL 32137

Title: S ( ) Change (X) Addition  
Name: ALLMON, DONNA V  
Address: 30 WESTMORELAND DR  
City-St-Zip: PALM COAST, FL 32164

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DONNA V ALLMON

S

04/30/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date