

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000039654

**FILED**  
**Apr 04, 2011**  
**Secretary of State**

**Entity Name:** LONESOME PINE DEVELOPMENT CORP.

**Current Principal Place of Business:**

7110 DAVIS CREEK RD  
JACKSONVILLE, FL 32256 US

**New Principal Place of Business:**

4939 BIG ISLAND DRIVE  
JACKSONVILLE, FL 32246 US

**Current Mailing Address:**

7110 DAVIS CREEK RD  
JACKSONVILLE, FL 32256 US

**New Mailing Address:**

4939 BIG ISLAND DRIVE  
JACKSONVILLE, FL 32246 US

**FEI Number:** 59-3517434

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHATKEWITZ, ALEXANDER G  
7110 DAVIS CREEK RD  
JACKSONVILLE, FL 32256 US

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

CHATKEWITZ, ALEXANDER G  
4939 BIG ISLAND DRIVE  
JACKSONVILLE, FL 32246 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:**

04/04/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** CHATKEWITZ, ALEXANDER G  
**Address:** 4939 BIG ISLAND DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32246

**Title:** D  
**Name:** WATSON, FRANK  
**Address:** 4939 BIG ISLAND DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32246

I hereby 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 all other like empowered.

**SIGNATURE:** ALEXANDER G CHATKEWITZ

PRES

04/04/2011

Electronic Signature of Signing Officer or Director

Date