

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000043380

Entity Name: LYNN KAUFMAN DEVELOPMENT, INC.

FILED
Jan 27, 2005
Secretary of State

Current Principal Place of Business:

2151 NW 2 AVE
SUITE 100
BOCA RATON, FL 33487

Current Mailing Address:

2151 NW 2 AVE
SUITE 100
BOCA RATON, FL 33487

New Principal Place of Business:

622 BANYAN TRAIL
SUITE 300
BOCA RATON, FL 33431

New Mailing Address:

622 BANYAN TRAIL
SUITE 300
BOCA RATON, FL 33431

FEI Number: 65-0837942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KAUFMAN, MICHAEL
2151 NW 2ND AVENUE
SUITE 100
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

KAUFMAN, MICHAEL
622 BANYAN TRAIL
SUITE 300
BOCA RATON, FL 33431 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:

01/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KAUFMAN, MICHAEL
Address: 2151 NW 2 AVENUE #100
City-St-Zip: BOCA RATON, FL 33487

Title: T () Delete
Name: HASKINS, STEPHEN L
Address: 2151 NW 2ND AVENUE #100
City-St-Zip: BOCA RATON, FL 33431

Title: S () Delete
Name: WALLING, SHARON
Address: 2151 NW 2ND AVE #100
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KAUFMAN, MICHAEL
Address: 622 BANYAN TRAIL, #300
City-St-Zip: BOCA RATON, FL 33431

Title: T (X) Change () Addition
Name: HASKINS, STEPHEN L
Address: 622 BANYAN TRAIL, #300
City-St-Zip: BOCA RATON, FL 33431

Title: S (X) Change () Addition
Name: WALLING, SHARON
Address: 622 BANYAN TRAIL, #300
City-St-Zip: BOCA RATON, FL 33431

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: SHARON M. WALLING

S

01/27/2005

Electronic Signature of Signing Officer or Director

Date