

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90382 027 ***150.00

DOCUMENT # P99000028316	
1. Entity Name AVALON DEVELOPMENT ENTERPRISES, INC.	

Principal Place of Business 770 1ST AVE N SAINT PETERSBURG, FL 33701	Mailing Address 770 1ST AVE N SAINT PETERSBURG, FL 33701
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2. Principal Place of Business 5113 CENTRAL AVE	3. Mailing Address 5113 CENTRAL AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State ST PETERSBURG FL	City & State ST PETERSBURG FL
Zip 33710	Zip 33710
Country FLA	Country FLA

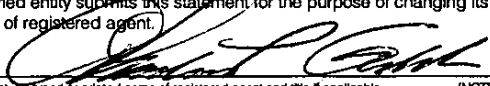
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04272006 Chg-P CR2E034 (11/05)

4. FEI Number 59-3565377		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent GODELS, CHARLES P 770 1ST AVE N SAINT PETERSBURG, FL 33701		7. Name and Address of New Registered Agent Name GODELS, CHARLES P. Street Address (P.O. Box Number is Not Acceptable) 5113 CENTRAL AVE. City ST. PETERSBURG FL Zip Code 33710

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE **4/27/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GODELS, CHARLES P 5950 BIKINI WAY N ST PETERBURG BEACH, FL 33706 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD YOVNNO, MADANNA 6103 ZEKNA RD LUTZ, FL 33558 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO YOVINO, MADANNA ☒ Change ☐ Addition 6103 ZELMA RD LUTZ, FL 33558
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LARSEN, LAURA 7524 17 LANE N SAINT PETERSBURG, FL 33702 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUNN, DAVID E 329 ALLENVIEW DR MECHANICSBURG, PA 17055 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, MICHAEL T. ☐ Change ☒ Addition 135 LAUGHING GULL LANE PALM HARBOR, FL 34682
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  DATE **4/27/06** 727-323-2346

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR