

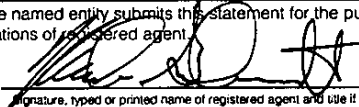
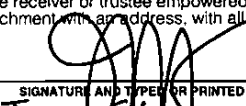


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 07, 2005 8:00 am**  
**Secretary of State**

03-07-2005 90272 043 \*\*\*158.75

<b>DOCUMENT # P99000057616</b> 1. Entity Name <b>MIROMAR DEVELOPMENT CORPORATION</b>					
Principal Place of Business <b>24870 BURNT PINE DRIVE BONITA SPRINGS, FL 34134</b>				Mailing Address <b>24870 BURNT PINE DRIVE BONITA SPRINGS, FL 34134</b>	
2. Principal Place of Business <b>10801 Corkscrew Rd.</b> Suite, Apt. #, etc. <b>Suite 305</b> City & State <b>Estero, FL</b> Zip <b>33928</b> Country <b>USA</b>		3. Mailing Address <b>10801 Corkscrew Road</b> Suite, Apt. #, etc. <b>Suite 305</b> City & State <b>Estero, FL</b> Zip <b>33928</b> Country <b>USA</b>			
4. FEI Number <b>59-3584715</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required				6. Name and Address of Current Registered Agent <b>GESCHWENDT, MARK 24870 BURNT PINE DRIVE BONITA SPRINGS, FL 34134</b>	
7. Name and Address of New Registered Agent Name <b>Same</b> Street Address (P.O. Box Number is Not Acceptable) <b>10801 Corkscrew Rd.</b> <b>Suite 305</b> City <b>Estero, FL</b>				Zip Code <b>33928</b>	
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 <b>3/1/05</b>	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MILLER, MARGARET J 24870 BURNT PINE DRIVE BONITA SPRINGS, FL 34134	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>10801 Corkscrew Road Suite 305 Estero, FL 33928</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCHMOYER, JERRY 24870 BURNT PINE DRIVE BONITA SPRINGS, FL 34134	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>10801 Corkscrew Road Suite 305 Estero, FL 33928</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ROOP, ROBERT 24870 BURNT PINE DRIVE BONITA SPRINGS, FL 34134	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>10801 Corkscrew Road Suite 305 Estero, FL 33928</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ROOP, ROBERT 24870 BUNT PINE DRIVE BONITA SPRINGS, FL 34134	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>10801 Corkscrew Road Suite 305 Estero, FL 33928</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <b>3/1/05</b> (234) 948-3666		
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>Jerry Schmoyer, Executive Vice President</b>					