

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000106588

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: AMELIA DEVELOPMENT COMPANY, INC.

## Current Principal Place of Business:

4930 SEA WATCH DRIVE  
AMELIA ISLAND, FL 32034

## New Principal Place of Business:

4930 SEA WATCH DR.  
AMELIA ISLAND, FL 32034

## Current Mailing Address:

961687 GATEWAY BOULEVARD  
SUITE 201-I  
FERNANDINA BEACH, FL 32034

## New Mailing Address:

POST OFFICE BOX 15189  
FERNANDINA BEACH, FL 32035

FEI Number: 59-3613838

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACOBS, ARTHUR I  
4961687 GATEWAY BOULEVARD, SUITE 201-I  
FERNANDINA BEACH, FL 32034 US

## Name and Address of New Registered Agent:

SEEVERS, GLENN I  
669 SOUTH FLETCHER AVENUE  
FERNANDINA BEACH, FL 32034 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: GLENN SEEVERS

04/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: KING, THOMAS V  
Address: P.O. BOX 15189  
City-St-Zip: AMELIA ISLAND, FL 32035

Title: STD ( ) Delete  
Name: KING, BARBARA ANN S  
Address: P.O. BOX 15189  
City-St-Zip: AMELIA ISLAND, FL 32035

Title: PD ( ) Delete  
Name: SEEVERS, GLENN  
Address: 669 SOUTH FLETCHER AVENUE  
City-St-Zip: FERNANDINA BEACH, FL 32034

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: GLENN SEEVERS

PD

04/07/2009

Electronic Signature of Signing Officer or Director

Date