2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000109823

1. Entity Name

C. PLAZA DEVELOPMENT CORP.



FILED Apr 09, 2008 08:00 A Secretary of State

Principal Place of Business

P.O. BOX 18419 SARASOTA, FL 34276 Mailing Address

P.O. BOX 18419 SARASOTA, FL 34276



DO NOT WRITE IN THIS SPACE

04072008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0969237

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

INGANAMORT, MILFORD 2941 SEASONS BLVD SARASOTA, FL 34240

DO NOT WRITE IN THIS SPACE

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 Signature, typed or uninted harve of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaturg).					DATE.
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financi Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees	U000000887187
10.	OFFICERS AND DIRECTORS 1947-217-90 - 80-010 - 811 150 .00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P INGANAMORT, MILFORD J P O BOX 18419 SARASOTA, FL 34276				
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NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE. NAME STREET ADDRESS					

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:

CITY-ST-ZIP

SCHATUBE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/08

941-922-4600

Daytime Phone #