

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S01211

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: PEARLSON DEVELOPMENT CORPORATION

## Current Principal Place of Business:

12030 SW 114 PL  
MIAMI, FL 33176 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BX 560100  
MIAMI, FL 332560100 US

## New Mailing Address:

FEI Number: 65-0215288

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRAIND, BRYAN S ESQ  
12030 SW 114 PL  
MIAMI, FL 33176 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CD ( ) Delete  
Name: PEARLSON, DOUGLAS,  
Address: PO BOX 560100  
City-St-Zip: MIAMI, FL 33256

Title: STD ( ) Delete  
Name: PEARLSON, SALLY S.,  
Address: PO BOX 560100  
City-St-Zip: MIAMI, FL 33256

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: EVD ( ) Change (X) Addition  
Name: CHINICK, ROBERT A  
Address: PO BOX 560100  
City-St-Zip: MIAMI, FL 33256

Title: VD ( ) Change (X) Addition  
Name: FRAIND, BRYAN S  
Address: PO BOX 560100  
City-St-Zip: MIAMI, FL 33256

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: DOUGLAS PEARLSON

CEO

03/12/2009

Electronic Signature of Signing Officer or Director

Date