

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S26128

FILED
Apr 16, 2009
Secretary of State

Entity Name: PRICE DEVELOPMENT COMPANY DOEC

Current Principal Place of Business:

3100 UNIVERSITY BLVD. SOUTH
101
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

3100 UNIVERSITY BLVD. SOUTH
101
JACKSONVILLE, FL 32216 US

New Mailing Address:

FEI Number: 59-3096273 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCINTYRE, ROD
3100 UNIVERSITY BLVD. SOUTH
101
JACKSONVILLE, FL 32216 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: PD () Delete
Name: BETTY WEST
Address: 2255 KEMP ROAD
City-St-Zip: BEAVERCREEK, OH 45431 US

Title: VD () Delete
Name: PRICE, CLIFFORD E.
Address: 1728 ALDER DR.
City-St-Zip: ORANGE PARK, FL 32073 US

Title: SD () Delete
Name: JIM PRICE
Address: 715 CLARENDON DRIVE
City-St-Zip: LANCASTER, SC 29720 US

Title: TD () Delete
Name: PRICE, RICHARD A.
Address: 4420 MONUMENT POINT DR.
City-St-Zip: JACKSONVILLE, FL 32225 US

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: SD (X) Change () Addition
Name: PRICE, JAMES M.
Address: 715 CLARENDON DRIVE
City-St-Zip: LANCASTER, SC 29720 US

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

Title: D () Change (X) Addition
Name: PRICE, ROBERT W.
Address: 1875 HICKORY LANE
City-St-Zip: ATLANTIC BEACH, FL 32233 US

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: ROBERT W. PRICE

D

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date