2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# S40927

Entity Name: THE CORPORATE DEVELOPMENT COMPANY

Current Principal Place of Business:

3200 NE 36 ST
STE 1010
FT LAUDERDALE, FL 33308

New Principal Place of Business:

3200 NE 36 ST
SUITE 1010
FT LAUDERDALE, FL 33308

Current Mailing Address:

3200 NE 36 ST
STE 1010
FT LAUDERDALE, FL 33308

New Mailing Address:

3200 NE 36TH ST.
SUITE 1010
FT. LAUDERDALE, FL 33308

FEI Number: 65-0255180 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PERLES, SUZANNE R.
3200 NE 36 ST
STE 1010
FT LAUDERDALE, FL 33308 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: MD ( ) Delete
Name: PERLES, SUZANNE R.,
Address: 3200 NE 36 ST #1010
City-St-Zip: FT LAUDERDALE, FL 33308

Title: MD ( ) Delete
Name: MCKISSICK, CARSON R.,
Address: 2080 LA CALA PLACE
City-St-Zip: SAN MARINO, CA 91108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change ( ) Addition
Name: PERLES, SUZANNE R
Address: 3200 NE 36 ST #1010
City-St-Zip: FT LAUDERDALE, FL 33308

Title: MD (X) Change ( ) Addition
Name: MCKISSICK, CARSON R
Address: 2080 LA CALA PLACE
City-St-Zip: SAN MARINO, CA 91108

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: SUZANNE R. PERLES MD 03/27/2009

Electronic Signature of Signing Officer or Director — Date