

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortonham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 PH 1:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # **V12137** (8)  
1. Corporation Name  
**FLORIDA DEVELOPMENT CORPORATION**

Principal Place of Business      Mailing Address  
**2045 SPRING BLVD**      **P. O. BOX 547796**  
**APOPKA FL 32703**      **ORLANDO FL 32854-7796**  
**US**      **US**

3. Date Incorporated or Qualified      3a. Date of Last Report  
**02/06/1992**      **03/01/1994**

4. FEI Number      Applied For  
**59-3112671**       Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Election Campaign Financing       **\$5.00 May Be Added to Fees**  
Trust Fund Contribution

8. This corporation has liability for intangible tax under S. 119.032, Florida Statutes       Yes       No

2. Principal Place of Business      2a. Mailing Address  
21 State, Apt. #, etc.      26 Suite, Apt. #, etc.  
22 City & State      27 City & State  
23 Zip      28 Zip      Country      29 Zip      30 Country

9. Name and Address of Current Registered Agent  
**A.G.C. CO.**  
**2300 SUN BANK CENTER**  
**ORLANDO FL 32801**

10. Name and Address of Now Registered Agent  
81 Name      **Paul Rahill**  
82 Street Address (P.O. Box Number is Not Acceptable)      **2045 Sprint Blvd.**  
83      **Apopka, FL 32703**  
84 City      **FL**      85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]*      DATE: **4/25/95**

12. OFFICERS AND DIRECTORS	
TITLE	<b>D</b>
NAME	<b>RAHILL, PAUL F.</b>
STREET ADDRESS	<b>1468 WILLIAMS DRIVE</b>
CITY- ST- ZIP	<b>WINTER PARK FL</b>
TITLE	<b>D</b>
NAME	<b>ROBINSON, KENNETH M.</b>
STREET ADDRESS	<b>3891 GLOUCESTER WAY</b>
CITY- ST- ZIP	<b>ORLANDO FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>2021 Sawgrass Drive</b>
2.3 STREET ADDRESS	<b>Apopka, FL 32712</b>
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual 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 12 or Block 13 if checked, or on an attachment, with an address.

SIGNATURE: *[Signature]*      **Paul Rahill**      **4/25/95**      **407-886-5533**