


FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90320 038 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

60025387

DOCUMENT # V29780 1. Entity Name MAKE-JAKE DEVELOPMENT, INC.	
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Principal Place of Business 855 SANDERLING DR. INDIALANTIC, FL 32903 US	Mailing Address PO BOX 1000 MELBOURNE, FL 32902-1000 US
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01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3125412	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent LEVY, RONALD D. 855 SANDERLING DR. INDIALANTIC, FL 32903

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP LEVY, RONALD D. PO BOX 1000 N/A MELBOURNE, FL 32902
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV LEVY, NORMA PO BOX 1000 N/A MELBOURNE, FL 32902
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST LEVY, NORMA PO BOX 1000 N/A MELBOURNE, FL 32902
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Ronald Levy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/06 (321) 7775384
Date Daytime Phone #