

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H70611

FILED  
Mar 16, 2008  
Secretary of State

Entity Name: HACIENDA DEVELOPMENT CORP.

## Current Principal Place of Business:

287 CLUB RIO  
EDGEWATER, FL 321417262

## New Principal Place of Business:

287 CLUB RIO  
EDGEWATER, FL 321417262 US

## Current Mailing Address:

287 CLUB RIO  
EDGEWATER, FL 321417262

## New Mailing Address:

287 CLUB RIO  
EDGEWATER, FL 321417262 US

FEI Number: 59-2571374

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

OSWALD & OSWALD, P.L.  
222 S WESTMONTE DR.  
SUITE 210  
ALTAMONTE SPRINGS, FL 32714 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: PC ( ) Delete  
Name: WALLSCHLAEGER, MARK A  
Address: 107 DONLON DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VD ( ) Delete  
Name: WALLSCHLAEGER, KEVIN S  
Address: 2625 TURNBULL ESTATES DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: TD ( ) Delete  
Name: WALLSCHLAEGER, STEVEN M  
Address: 204 N RIVERSIDE DR.  
City-St-Zip: EDGEWATER, FL 32132

Title: SD (X) Delete  
Name: WALLSCHLAEGER, RANDAL A  
Address: 750 WILLIARD STREET  
City-St-Zip: NEW SMYRNA BEACH, FL 32132

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change ( ) Addition  
Name: WALLSCHLAEGER, MARK A  
Address: 107 DONLON DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: VD (X) Change ( ) Addition  
Name: WALLSCHLAEGER, KEVIN S  
Address: 2625 TURNBULL ESTATES DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: TD (X) Change ( ) Addition  
Name: WALLSCHLAEGER, STEVEN M  
Address: 501 N. CAUSEWAY, UNIT 205  
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

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

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: STEVEN M. WALLSCHLAEGER

TD

03/16/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date