

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 248064

FILED
Apr 18, 2006
Secretary of State

Entity Name: CHAPMAN & ASSOCIATES, INC.

Current Principal Place of Business:

1877 NORTHGATE BLVD.
SARASOTA, FL 34234 US

New Principal Place of Business:

Current Mailing Address:

1877 NORTHGATE BLVD.
SARASOTA, FL 34234 US

New Mailing Address:

FEI Number: 59-2061511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, ARTHUR
1877 NORTHGATE BLVD.
SARASOTA, FL 34234 US

Name and Address of New Registered Agent:

SCHACKOW, SAM
1877 NORTHGATE BLVD.
SARASOTA, FL 34234 US

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: SAM SCHACKOW 04/18/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP (X) Delete
Name: BECKMANN, C. DANA
Address: 6211 MEDICI COURT 110
City-St-Zip: SARASOTA, FL

Title: P () Delete
Name: SCHACKOW, SAMUEL R
Address: 9514 ROYAL CALCUTTA PL
City-St-Zip: BRADENTON, FL

Title: VP () Delete
Name: HATIN, JAMES T
Address: 3822 GLEN OAKS MANOR
City-St-Zip: SARASOTA, FL

Title: ST () Delete
Name: CHAPMAN, ARTHUR
Address: 5136 ADMIRAL PLACE
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SAM SCHACKOW P 04/18/2006

Electronic Signature of Signing Officer or Director Date