2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002229

Entity Name: CHAPPELL STUDIO, INC.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 280 WEST TYLER FAIRFIELD, IA 52556 **Current Mailing Address: New Mailing Address:** 280 WEST TYLER FAIRFIELD, IA 52556 FEI Number: 20-8815750 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition THOMAS, DAVID E JR Name: Name: 880 CARILLON PKWY Address: Address: City-St-Zip: ST PETERSBURG, FL 33716 City-St-Zip: Title: **VPAS** Title: () Delete () Change () Addition Name: OSTROW, GENE J Name: 880 CARILLON PKWY Address: Address: ST PETERSBURG, FL 33716 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition OSTROW, GENE J Name: Name: 880 CARILLON PKWY Address: Address: City-St-Zip: ST PETERSBURG, FL 33716 City-St-Zip: Title: **VPAS** () Delete Title: () Change () Addition FRANKE, BRUCE Name: Name: Address: 2280 WEST TYLER Address: City-St-Zip: FAIRFIELD, IA 52556 City-St-Zip: Title: **VPAS** Title: () Delete () Change () Addition Name: DENBAUM, LEWIS Name: 2280 WEST TYLER Address: Address:

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.

City-St-Zip:

SIGNATURE: LEWIS DENBAUM VPAS 01/14/2009

City-St-Zip:

FAIRFIELD, IA 52556