


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007 08:00 AM
Secretary of State

DOCUMENT # N00000001462 1. Entity Name CHASTAIN DEVELOPMENT CORP.	
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Principal Place of Business 2730 CUMBERLAND BLVD. SYRNA, GA 30080	Mailing Address 2730 CUMBERLAND BLVD. SYRNA, GA 30080
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04162007 No Chg-NP CR2E037 (4/06)

4. FEI Number 58-1847119	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
 2731 EXECUTIVE PARK DRIVE
 SUITE 4
 WESTON, FL 33331

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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 reconstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25
Due by May 1, 2007

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	PD DUMAS, MARK M 2257 NORBURY DRIVE SMYRNA, GA 30080
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, OC 1425 SYLVAN CIRCLE NE ATLANTA, GA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WESTRAAD, LEIGH C 954 WATERWAY LANE MYRTLE BEACH, SC 29572
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 617, 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: *[Signature]* 4/16/07 770 431 9696
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #