

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000079191

FILED
May 14, 2006
Secretary of State

Entity Name: CHARTED COURSES ENTERPRISES, INC.

Current Principal Place of Business:

1920 W CLINTON STREET
TAMPA, FL 33604 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 23264
TAMPA, FL 33623 US

New Mailing Address:

4360 ORANGE RIVER LOOP ROAD
FORT MYERS, FL 33901 US

FEI Number: 55-0786826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FOLCIK, PETER
204 N MACDILL AVENUE
TAMPA, FL 33609 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARR, WANDA F
Address: 1920 W CLINTON STREET
City-St-Zip: TAMPA, FL 33604

Title: VPCF () Delete
Name: BARR, BERNARDA
Address: 1920 W CLINTON STREET
City-St-Zip: TAMPA, FL 33604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BARR, WANDA F
Address: 4360 ORANGE RIVER LOOP ROAD
City-St-Zip: FORT MYERS, FL 33905

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: WANDA F. BARR

D

05/14/2006

Electronic Signature of Signing Officer or Director

_____ Date