

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000007591

FILED  
Apr 14, 2005  
Secretary of State

Entity Name: CHIPPERS OF BRANDON, INC.

## Current Principal Place of Business:

1419 NEW BRITAIN DR  
BRANDON, FL 33511

## New Principal Place of Business:

17849 MISSION OAK DR  
LITHIA, FL 33547

## Current Mailing Address:

P O BOX 756  
BRANDON, FL 33511

## New Mailing Address:

P O BOX 62  
LITHIA, FL 33547

FEI Number: 20-1785252

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLEWORTH, ROGER  
1419 NEW BRITAIN DR  
BRANDON, FL 33511 US

## Name and Address of New Registered Agent:

CLEWORTH, ROGER  
17849 MISSION OAK DR  
LITHIA, FL 33547 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: \_\_\_\_\_

04/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CLEWORTH, ROGER  
Address: 1419 NEW BRITAIN DR  
City-St-Zip: BRANDON, FL 33511

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CLEWORTH, ROGER  
Address: 17849 MISSION OAK DR  
City-St-Zip: LITHIA, FL 33547

Title: O ( ) Change (X) Addition  
Name: CLEWORTH, FELICIA M  
Address: 17849 MISSION OAK DR  
City-St-Zip: LITHIA, FL 33547

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FELICIA CLEWORTH

O

04/14/2005

Electronic Signature of Signing Officer or Director

Date