

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003330

FILED  
Jan 18, 2012  
Secretary of State

**Entity Name:** CHAPMAN PARTNERSHIP, INC.

**Current Principal Place of Business:**

1550 N. MIAMI AVE.  
MIAMI, FL 33136 US

**New Principal Place of Business:**

**Current Mailing Address:**

1550 N. MIAMI AVE.  
MIAMI, FL 33136 US

**New Mailing Address:**

**FEI Number:** 65-0425069

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VINCENT, H. DANIEL  
1550 N MIAMI AVE  
MIAMI, FL 33136 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

**OFFICERS AND DIRECTORS:**

Title: C  
Name: BELL, TRISH  
Address: 457 LEUCADENDRA DRIVE  
City-St-Zip: CORAL GABLES, FL 33156

Title: TD  
Name: HUSTON, JR., TOM  
Address: 1121 MADRUGA AVENUE  
City-St-Zip: CORAL GABLES, FL 33146

Title: SD  
Name: LEWIS, LYNN B  
Address: 1390 BRICKELL AVE. STE. 280  
City-St-Zip: MIAMI, FL 33131

Title: D  
Name: ERBAN, TOMAS  
Address: 604 MALAGA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: BESTMAN, EVALINA DR.  
Address: 1313 NW 36 STREET, SUITE 400  
City-St-Zip: MIAMI, FL 33142

Title: DCC  
Name: HOWE, OSMOND C JR.  
Address: 2000 TOWERSIDE TERR., SUITE 402  
City-St-Zip: MIAMI, FL 33138

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: H. DANIEL VINCENT

DIR

01/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date