

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 265686

FILED  
Feb 01, 2008  
Secretary of State

Entity Name: CHENEY BROS., INC.

**Current Principal Place of Business:**

ONE CHENEY WAY  
RIVIERA BEACH, FL 334047000 US

**New Principal Place of Business:**

**Current Mailing Address:**

ONE CHENEY WAY  
RIVIERA BEACH, FL 334047000 US

**New Mailing Address:**

FEI Number: 59-1003104

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MCBRIDE, RACHELLE R ESQUIRE  
ONE CHENEY WAY  
RIVIERA BEACH, FL 334047000 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ST ( ) Delete  
Name: BELL, PATTI L  
Address: ONE CHENEY WAY  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: CD ( ) Delete  
Name: RUSSELL, BYRON C  
Address: ONE CHENEY WAY  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: P ( ) Delete  
Name: JAYNE, MARK H  
Address: ONE CHENEY WAY  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D ( ) Delete  
Name: BOZZUOTO, MICHAEL A  
Address: ONE CHENEY WAY  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D ( ) Delete  
Name: SULLIVAN, MIKE  
Address: ONE CHENEY WAY  
City-St-Zip: RIVIERA BEACH, FL 33404

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: BYRON C RUSSELL

CD

02/01/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date