2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 10, 2007 08:00 A Secretary of State **DOCUMENT # 405241** 1. Entity Name CHAINWHEEL DRIVE, INCORPORATED Principal Place of Business Mailing Address 1770 DREW ST 1770 DREW ST CLEARWATER, FL 33755 CLEARWATER, FL 33755 IJS 01082007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1404958 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOHNSON BRIAN E. DO NOT WRITE 7190 SEMINOLE BLVD SEMINOLE, FL 33772 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PΠ TITLE JESSUP,THOMAS NAME STREET ADDRESS 2826 SABER DR. U00000698013 04/18/07-80064-010 150.00 CITY-ST-ZIP CLEARWATER, FL 33759 TITLE STD JESSUP, DOROTHY NAME STREET ADDRESS 2826 SABER DR. CITY-ST-ZIP CLEARWATER, FL 33759 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 607, 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:

STREET ADDRESS CITY-ST-ZIP

> OFFICER OR DIRECTOR SIGNATURE AND TYPED OR