


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2004 8:00 am
Secretary of State

02-10-2004 90039 048 ***158.75

DOCUMENT # 460118
 1. Entity Name
CHAPMAN CONSTRUCTION, INC.



Principal Place of Business 6085 GREENLAND RD. JACKSONVILLE, FL 32258	Mailing Address 6085 GREENLAND RD. JACKSONVILLE, FL 32258
---	---

94013453



01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1552626	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHAPMAN, FRANKLIN
 5200 GREENLAND RD.
 JACKSONVILLE, FL 32258

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHAPMAN, FRANKLIN 5200 GREENLAND RD. JACKSONVILLE, FL 32258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CHAPMAN, MARJORIE 5200 GREENLAND RD. JACKSONVILLE, FL 32258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CHAPMAN, THOMAS 1766 PITCH PINE JACKSONVILLE, FL 32223
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHAPMAN, RICHARD 1715 DEBBIE LANE ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 *Marjorie Chapman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-6-04 904-268-8874
Date Daytime Phone #