

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 589680

Entity Name: CHELLERIE, INC.

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

1861 N. POWERLINE RD.
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1861 N. POWERLINE RD.
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 59-1857125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHAPMAN, DALE
1861 NORTH POWERLINE ROAD
POMPANO BEACH, FL 33069 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: V () Delete
Name: CHAPMAN, WILLIAM
Address: 12034 NW 49TH DR
City-St-Zip: CORAL SPRINGS, FL 33076

Title: PTSD () Delete
Name: CHAPMAN, DALE
Address: 7231 MIAMI LAKES DRIVE APT C10
City-St-Zip: MIAMI LAKES, FL 33014 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PTD (X) Change () Addition
Name: CHAPMAN, DALE
Address: 7231 MIAMI LAKES DRIVE APT C10
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: S () Change (X) Addition
Name: CHAPMAN, DONNA
Address: 7231 MIAMI LAKES DRIVE APT C10
City-St-Zip: MIAMI LAKES, FL 33014 US

I hereby certify that the information supplied with this filing does not qualify for the 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: DALE CHAPMAN

P

04/26/2006

Electronic Signature of Signing Officer or Director

Date