2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 638362

Entity Name: CHANDLER PROPERTIES, INC.

FILED Feb 20, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1636 N. MONROE STREET TALLAHASSEE, FL 32303 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1458

TALLAHASSEE, FL 32302 US

FEI Number: 59-1938995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHANDLER, GILBERT S., JR

1636 NORTH MONROE STREET
TALLAHASSEE, FL 32303 US

CHANDLER, BEULAH M.

1636 NORTH MONROE STREET
TALLAHASSEE, FL 32303 US

TALLAHASSEE, FL 32303 US

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: BEULAH M. CHANDLER 02/20/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

111 N. RANGE

MADISON, FL

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CHANDLER, GILBERT S, JR CHANDLER, BEULAH M., Name: Name: 2004 WINTHROP WAY 1636 NORTH MONROE STREET Address: Address: City-St-Zip: TALLAHASSEE, FL 00000, City-St-Zip: TALLAHASSEE, FL 32303

Title: VD () Delete Title: D (X) Change () Addition
Name: CHANDLER BEULAH M Name: CHANDLER GILBERT S. III

Name: CHANDLER, BEULAH M, Name: CHANDLER, GILBERT S, III
Address: 2004 WINTHROP WAY Address: 1250 JESSE JEWEL PARKWAY, SUITE 300

City-St-Zip: TALLAHASSEE, FL 00000, City-St-Zip: GAINESVILLE, GA 30501

Title: D () Delete Title: STD (X) Change () Addition Name: CHANDLER, GILBERT S, III Name: WEEKS, VIRGINIA K.,

Address: 3161 OVERLOOK DRIVE Address: 141 NE RANGE AVENUE
City-St-Zip: GAINESVILLE, GA City-St-Zip: MADISON, FL 32340

Title: STD (X) Delete Title: () Change () Addition Name: WEEKS, VIRGINIA K., Name:

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: BEULAH M CHANDLER PD 02/20/2009