



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2007 8:00 am
Secretary of State

03-22-2007 90011 042 ****61.25

DOCUMENT # 729975 1. Entity Name CHATEAU SUZANNE, INC.					
Mailing Address 3030 BINNACLE DRIVE NAPLES, FL 34103		60027283 			
3. Mailing Address Suite, Apt. #, etc. City & State Zip Country					
4. FEI Number 59-1641909				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				01162007 Chg-NP CR2E037 (12/06)	
6. Name and Address of Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee Is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	P BELCHER, JACK 555 PUTTER PT PL NAPLES, FL 34103	TITLE	[] Change [] Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	S CAMBRUZZI, IDA MAE 3030 BINNACLE DR NAPLES, FL 34103	TITLE	[] Change [] Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	T MAKUNAS, MIKE 3030 BINNACLE DR NAPLES, FL 34103	TITLE	[] Change [] Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	V KLYCZEK, WALTER 12425 BARONE DR SILVER CREEK, NY 14136	TITLE	[] Change [] Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	M VIVIANO, GIROLAMO 327 ELK RD MONROEVILLE, NJ 08343	TITLE	[] Change [] Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	[] Delete	TITLE	[] Change [] Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
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 617, 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: <i>Jack J. Belcher, President</i> _____ REGISTERED AGENT		Date: <i>3/15/07</i> Daytime Phone #: <i>239-860-0498</i>			

Chateau Suzanne, Inc