2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F00000005823

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP VD

STD

CHALLONER III, M A

HAMPTON, VA 23661

HAMPTON, VA 23661

CHALLONER, CH

107 E, STREET

107 E. STREET

FILED Feb 07, 2005 08:00 AM Secretary of State

DO NOT WRITE

IN THIS SPACE

MAIN INC	DUSTRIES, INC.				
Principal Plac	e of Business N	failing Address	<u> </u>		
107 E. ST. HAMPTON, V		107 E. ST. Hampton, VA 23661			
		and the same of th	1.122		
DO NOT WRITE IN THIS SPA				02022005 No Chg-P CR2E034 (10/03)	
			CE	4. FEI Number Applied Fr 54-1025581 Not Applied	
			5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of Current Regis	tered Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			DO NOT WRITE IN THIS SPACE		
	lons of registered agent.	purpose of changing its registere	ed office or register	ered agent, or both, in the State of Florida. I am familiar with, and acc	
	Signature, typed or printed name of registered agent and title	il applicable (NOTE Registere	d Agent signatura requirer	ed when reinstating) DATE	
		Election Campaign Finar Trust Fund Contribution.		5.00 May Be ided to Fees	
10. OFFICERS AND DIRECTORS			I	THE PARTY OF THE P	
TITLE	PCD		I ——		
NAME	CHALLONER III, R M			U00000010001	
STREET ADDRESS CITY-ST-ZIP	107 E. ST. HAMPTON, VA 23661			000000218501 02/07/05-80068-003 150.00	

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i).

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: CHALLOWER 2-2-05 757-380-018
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayline Prome #