

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004057

Entity Name: CHOMP INC.

FILED
Apr 25, 2006
Secretary of State

Current Principal Place of Business:

20 MATHEWSON DRIVE
WEYMOUTH, MA 02189

New Principal Place of Business:

Current Mailing Address:

20 MATHEWSON DRIVE
WEYMOUTH, MA 02189

New Mailing Address:

FEI Number: 04-3481067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRASNER, JACK
9502 SOMERSET ISLAND COURT
TAMPA, FL 33626 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: PD () Delete
Name: SPEARE, SARAH
Address: 13 ANDERSON DRIVE
City-St-Zip: FALMOUTH, ME 04105

Title: TSD () Delete
Name: LUTYENS, LESLEY
Address: 115 HOLWORTHY ST
City-St-Zip: CAMBRIDGE, MA 02140

Title: D () Delete
Name: PUTNAM, SANDY
Address: 74 MAIN STREET
City-St-Zip: LEBANON, NJ 088330565

Title: D () Delete
Name: FORDEN, KENT
Address: 74 MAIN STREET
City-St-Zip: LEBANON, NJ 08833

Title: D () Delete
Name: MEYERS, KEN
Address: 20 MATHEWSON DR.
City-St-Zip: WEYMOUTH, MA 02189

Title: D (X) Delete
Name: MCCARTHY, ROBERT
Address: 722 SOUTH PARK
City-St-Zip: HINSDALE, IL 60521

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: LUTYENS, LESLEY
Address: 115 HOLWORTHY ST
City-St-Zip: CAMBRIDGE, MA 02140

Title: D (X) Change () Addition
Name: MEYERS, KENNETH
Address: 20 MATHEWSON DRIVE
City-St-Zip: WEYMOUTH, MA 02189

Title: T (X) Change () Addition
Name: SIEWERS, DAVID
Address: 20 MATHEWSON DRIVE
City-St-Zip: WEYMOUTH, MA 02189

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

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

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: DAVID SIEWERS

CFO

04/25/2006

Electronic Signature of Signing Officer or Director

Date