

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001611

FILED
Apr 19, 2006
Secretary of State

Entity Name: CHOCTAW CORPORATION

Current Principal Place of Business:

1333 CAMPUS PARKWAY
NEPTUNE, NJ 07753

New Principal Place of Business:

Current Mailing Address:

1333 CAMPUS PARKWAY
NEPTUNE, NJ 07753

New Mailing Address:

FEI Number: 46-0507175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DVPS () Delete
Name: HYER, MICHAEL H
Address: 8505 FREEPORT PARKWAY
City-St-Zip: IRVING, TX 75063

Title: DPCE () Delete
Name: MANNINS, RICHARD
Address: 3500 MAPLE AVE
City-St-Zip: DALLAS, TX 75219

Title: VP () Delete
Name: BLECHA, JOAN B
Address: 4190 US HIGHWAY 17 SOUTH
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: T () Delete
Name: NICHOLLS, SIMON
Address: 1333 CAMPUS PARKWAY
City-St-Zip: NEPTUNE, NJ 07753

Title: AS () Delete
Name: HUTCHINSON, JOHN M
Address: 1333 CAMPUS PARKWAY
City-St-Zip: NEPTUNE, NJ 07753

Title: AS () Delete
Name: AVERY, CECIL C
Address: 1333 CAMPUS PARKWAY
City-St-Zip: NEPTUNE, NJ 07753

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DPCE (X) Change () Addition
Name: MANNING, RICHARD
Address: 3500 MAPLE AVE
City-St-Zip: DALLAS, TX 75219

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

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

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: JOHN M. HUTCHINSON

AS

04/19/2006

Electronic Signature of Signing Officer or Director

_____ Date