

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90317 019 ***150.00

DOCUMENT # F03000004092

1. Entity Name
CH WIRELESS CONSULTING, INC.



Principal Place of Business

**9767 HUNTSMAN PATH
PENSACOLA, FL 32514**

Mailing Address

**9767 HUNTSMAN PATH
PENSACOLA, FL 32514**

14000382



DO NOT WRITE IN THIS SPACE

02172005 No Chg-P CR2E034 (10/03)

4. FEI Number
75-3108387

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HEYL, CHRIS
9767 HUNTSMAN PATH
PENSACOLA, FL 32514**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HEYL, CHRIS
STREET ADDRESS	99 ATLANTIC BLVD A5
CITY-ST-ZIP	INDIAN HARBOR BEACH, FL 32937
TITLE	D
NAME	HEYL, TONI
STREET ADDRESS	9767 HUNTSMAN PATH
CITY-ST-ZIP	PENSACOLA, FL 32514
TITLE	P
NAME	Heyl, Chris
STREET ADDRESS	9767 Huntsman Path
CITY-ST-ZIP	Pensacola, FL 32514
TITLE	D
NAME	TONI HEYL
STREET ADDRESS	9767 Huntsman Path
CITY-ST-ZIP	Pensacola, FL 32514
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Chris Heyl 4/21/05

Date

850-259-0011

Daytime Phone #