## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000005801

Entity Name: CHELSEA RESIDENTIAL GROUP, INC.

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:				
1518 W. KOENIG LANE AUSTIN, TX 787561416			333 NORTH FIRST STREET, SUITE 310 JACKSONVILLE BEACH, FL 32250				
Current Mailing Address:			New Mailing Address:				
1518 W. KOENIG LANE AUSTIN, TX 787561416			333 NORTH FIRST STREET, SUITE 310 JACKSONVILLE BEACH, FL 32250				
FEI Number: 74-2925238 FEI Number Applied For ( ) FEI Num				mber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent: Name					me and Address of New Registered Agent:		
EDCOLAW, INC. 6 E. BAY ST., STE. 500 JACKSONVILLE, FL 32202 US							
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:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	CDP () I CONK, EDWARE 1518 W. KOENK AUSTIN, TX 787	S LANE		Title: Name: Address: City-St-Zip:	CONK, EDW 333 NORTH	(X) Change () Addition /ARD W FIRST STREET, SUITE 310 LLE BEACH, FL 32250	
Title: Name: Address: City-St-Zip:	DS () I CONK, JOELLYN 1518 W. KOENK AUSTIN, TX 787	3 LANE		Title: Name: Address: City-St-Zip:	CONK, JOEI 333 NORTH	(X) Change () Addition LLYN FIRST STREET, SUITE 310 LLE BEACH, FL 32250	
Title: Name: Address: City-St-Zip:	DVP () I CONK, CHRISTO 1518 W. KOENK AUSTIN, TX 787	PHER S LANE		Title: Name: Address: City-St-Zip:	CONK, CHR 333 NORTH	(X) Change ( ) Addition ISTOPHER FIRST STREET, SUITE 310 LLE BEACH, FL 32250	
Title: Name: Address: City-St-Zip:	T ()[ CASTANEDA, JO 1518 W. KOENIG AUSTIN, TX 787	SE A B LANE		Title: Name: Address: City-St-Zip:	ROGERS, B 333 NORTH	(X) Change () Addition ILL FIRST STREET, SUITE 310 LLE BEACH, FL 32250	
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	PORTER, JII 333 NORTH	()Change(X)Addition M FIRST STREET, SUITE 310 LLE BEACH, FL 32250	
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	LONG, JAN 333 NORTH	( ) Change (X) Addition  FIRST STREET, SUITE 310  LLE REACH FL 32250	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: EDWARD CONK CDP 04/26/2005