

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005801

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: CHELSEA RESIDENTIAL GROUP, INC.

## Current Principal Place of Business:

333 NORTH FIRST STREET, SUITE 310  
JACKSONVILLE BEACH, FL 32250

## New Principal Place of Business:

7785 BAYMEADOWS WAY, SUITE 200  
JACKSONVILLE, FL 32256

## Current Mailing Address:

333 NORTH FIRST STREET, SUITE 310  
JACKSONVILLE BEACH, FL 32250

## New Mailing Address:

7785 BAYMEADOWS WAY, SUITE 200  
JACKSONVILLE, FL 32256

FEI Number: 74-2925238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EDCOLAW, INC.  
6 E. BAY ST., STE. 500  
JACKSONVILLE, FL 32202 US

## Name and Address of New Registered Agent:

WILLIAM S. ROGERS  
7785 BAYMEADOWS WAY, SUITE 200  
JACKSONVILLE, FL 32256 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: WILLIAM S. ROGERS

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CDP ( ) Delete  
Name: CONK, EDWARD W  
Address: 333 NORTH FIRST STREET, SUITE 310  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DS ( ) Delete  
Name: CONK, JOELLYN  
Address: 333 NORTH FIRST STREET, SUITE 310  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DVP ( ) Delete  
Name: CONK, CHRISTOPHER  
Address: 333 NORTH FIRST STREET, SUITE 310  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP ( ) Delete  
Name: ROGERS, BILL  
Address: 333 NORTH FIRST STREET, SUITE 310  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP ( ) Delete  
Name: PORTER, JIM  
Address: 333 NORTH FIRST STREET, SUITE 310  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP ( ) Delete  
Name: LONG, JAN  
Address: 333 NORTH FIRST STREET, SUITE 310  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDP (X) Change ( ) Addition  
Name: CONK, EDWARD W  
Address: 7785 BAYMEADOWS WAY, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32256

Title: DS (X) Change ( ) Addition  
Name: CONK, JOELLYN  
Address: 7785 BAYMEADOWS WAY, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32256

Title: DVP (X) Change ( ) Addition  
Name: CONK, CHRISTOPHER  
Address: 7785 BAYMEADOWS WAY, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change ( ) Addition  
Name: ROGERS, BILL  
Address: 7785 BAYMEADOWS WAY, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change ( ) Addition  
Name: PORTER, JIM  
Address: 7785 BAYMEADOWS WAY, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change ( ) Addition  
Name: LONG, JAN  
Address: 7785 BAYMEADOWS WAY, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32256

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: EDWARD CONK

PTR

04/26/2006

Electronic Signature of Signing Officer or Director

Date