


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 20, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # F71002 1. Entity Name CHANCEY RADIATOR OF HARDEE CO., INC.	
---	---

Principal Place of Business 104 EAST ORANGE STREET WAUCHULA, FL 33873	Mailing Address 104 EAST ORANGE STREET WAUCHULA, FL 33873
---	---

**DO NOT WRITE IN THIS SPACE**



01122004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2187967	Applied For <input type="checkbox"/> Not Applicable
-----------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--------------------------------

6. Name and Address of Current Registered Agent  WEEKS, ROTIN C 404 S. SIXTH AVE. WAUCHULA, FL 33873
--

**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
--	--	------------

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHANCEY, HENRY LEE 2024 POPASH RD WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000008552  
01/20/04-80065-018 150.00

**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: <i>Henry Lee Chancey</i> Henry Lee Chancey Pres. 1-863-533-4848	Date _____	Daytime Phone # _____
--	------------	-----------------------