


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 8:00 am
Secretary of State

01-12-2004 90016 037 ***150.00

DOCUMENT # F97000006018 1. Entity Name CHIEF MANAGEMENT INC.																											
Principal Place of Business BOX7442 BRADENTON, FL 34210		Mailing Address BOX7442 BRADENTON, FL 34210																									
2. Principal Place of Business Suite, Apt. CHIEF MANAGEMENT BOX 457 CORTEZ, FL 34215		3. Mailing Address Suite, Apt. CHIEF MANAGEMENT BOX 457 CORTEZ, FL 34215																									
City & State CORTEZ, FL 34215		City & State CORTEZ, FL 34215																									
Zip 34215		Zip 34215																									
Country USA		Country USA																									
4. FEI Number 59-3469707		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 HEADRICK, G C/O RUSTY REX 3706 14TH ST W BRADENTON, FL 34205		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																									
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">P</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HEADRICK, GARY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5323 88TH ST W</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>BRADENTON, FL 34210</td> <td></td> </tr> </table>		TITLE	P	<input type="checkbox"/> Delete	NAME	HEADRICK, GARY		STREET ADDRESS	5323 88TH ST W		CITY-STATE-ZIP	BRADENTON, FL 34210		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;"></td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-STATE-ZIP		
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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 changed, or on an attachment with an address, with all other like empowered.																											
SIGNATURE: <i>G. Headrick</i> HEADRICK <i>1/9/04</i> 795-6756 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																											

Attachment
Doc. # F97000006018
24001217

To receive a form by mail:

- Detach this postcard.
- Enter change of address, if applicable.
- Affix postage on reverse side and mail.
- Allow 7-10 business days to receive form.

F97000006018
CHIEF MANAGEMENT INC.
BOX 442
BRADENTON FL 34210-0642

Change of Address

CHIEF MANAGEMENT

BOX 457

CORTEZ, FL 34215



CR2E095 10/03