

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000006825

FILED
Aug 07, 2003
Secretary of State

Entity Name: CHACONIA FUND SERVICES, INC.

Current Principal Place of Business:

1000 BRICKELL AVENUE, SUITE 800
MIAMI, FL 331313047

New Principal Place of Business:

NW 114TH AVENUE
4564
MIAMI, FL 33178

Current Mailing Address:

1000 BRICKELL AVENUE, SUITE 800
MIAMI, FL 331313047

New Mailing Address:

NW 114TH AVENUE
4564
MIAMI, FL 33178

FEI Number: 65-0800677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: BENN, CLARRY
Address: 82 INDEPENDENCE SQ/PT OF SPAIN
City-St-Zip: TRINIDAD & TOBAGO, WI

Title: VTD () Delete
Name: NICKIE, RENRICK
Address: 82 INDEPENDENCE SQ/PT OF SPAIN
City-St-Zip: TRINIDAD & TOBAGO, WI

Title: CD () Delete
Name: CHANG, JUDY Y
Address: 82 INDEPENDENCE SQ/PT OF SPAIN
City-St-Zip: TRINIDAD & TOBAGO, WI

Title: S (X) Delete
Name: PAYNE, ULICE JR
Address: 777 E WISCONSIN AVE, 37TH FL
City-St-Zip: MILWAUKEE, WI 53202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VTDS (X) Change () Addition
Name: NICKIE, RENRICK
Address: 82 INDEPENDENCE SQ/PT OF SPAIN
City-St-Zip: TRINIDAD & TOBAGO, WI

Title: CD (X) Change () Addition
Name: ALLEYNE, HUBERT H
Address: 82 INDEPENDENCE SQ/PT OF SPAIN
City-St-Zip: TRINIDAD & TOBAGO, WI

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RENRICK NICKIE

VTDS

08/07/2003

Electronic Signature of Signing Officer or Director

_____ Date