2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # G73008

1. Entity Name
C.H.A.D., INC.

Principal Place of Business	Mailing Address
1847 1ST AVE NORTH ST. PETERSBURG, FL 33713 US	8199 W PIN OAK COURT HOMOSASSA, FL 34448 US

DO NOT WRITE IN THIS SPACE

02272004   No Chg-P   CR2E034 (10/03)

4. FEI Number 59-2358390	Applied For
	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STAKE, LARRY L.
8199 W PIN OAK COURT
HOMOSASSA, FL 34448

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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_____
Signature, typed or printed name of registered agent and title if applicable.   (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.   ☐   **$5.00** May Be Added to Fees

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03/08/04=80013-023 150 00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	STAKE, LARRY L.
STREET ADDRESS	8199 W PIN OAK COURT
CITY-ST-ZIP	HOMOSASSA, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-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 if changed, or on an attachment with an address, with all other like empowered.

LARRY C. STAKE

SIGNATURE: _____   3-2-04   727-82-1F95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #