2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 12, 2007 08:00 AM Secretary of State

ANNUAL REPORT				Secretary of Sta		
	MENT # J03571		•	0	ecretary of Sta	
1. Entity Nam CHANCIE	e E'S PACKAGE & TAVERN, INC	C .				
	H DAVIS HIGHWAY	Mailing Address 9401 NORTH DAVIS HIGHWAY PENSACOLA, FL 32514	,		I 27/18 11 /7/ 8 11/1/ 1888 187	A A A A A A A A A A A A A A A A A A A
C	OO NOT WRITE	CE	01222007 4. FEI Numb 59-264	No Chg-P	Applied For Nor Applicable	
	6. Name and Address of Current Rec	sistered Agent		DΟ	NOT W	RIT⊑
9401 N DAVIS HWY PENSACOLA, FL 32514			DO NOT WRITE IN THIS SPACE			
the obligat	e named entity submits this statement for the tions of registered agent Sonature, typed or proved name of registered agent and the tion of the tion o		d Agent signatur ë reqintë			DATE 0633580 -80067-020 150.00
10.	OFFICERS AND DIF	ECTORS				
TITLE NAME STREET AUDHESS CITY-SI-ZIP TITLE NAME	PD MACE, WILLIAM DALE 9401 N DAVIS HWY PENSACOLA, FL 32514					
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	/RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE			
NAME STREET ADDRESS						

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 trusted 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 acadress, with all other like empowered.

SIGNATURE

NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 FEB-7 150-474-4708

Daytime Pho