

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004330

Entity Name: CHAPMAN & GALLE, PLC

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

13501 SOUTH SHORE BOULEVARD
SUITE 103
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

13501 SOUTH SHORE BOULEVARD
SUITE 103
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 65-1090384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLE, CRAIG T
13501 SOUTH SHORE BOULEVARD
SUITE 103
WELLINGTON, FL 33414 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GALLE, CRAIG T
Address: 11198 POLO CLUB ROAD
City-St-Zip: WEST PALM BEACH, FL 33414

Title: MGRM () Delete
Name: CHAPMAN, AVERY S
Address: 11194 W FOREST HILL BLVD
City-St-Zip: WEST PALM BEACH, FL 33414

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CRAIG T. GALLE

MGRM

03/19/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date