2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2004
Secretary of State

DOCUMENT# L03000046595

Entity Name: CHAPMAN TRADERS, LLC

Current Principal Place of Business:

4625 RIVERS EDGE VILLAGE LANE, #5301
PONCE INLET, FL 32127

New Principal Place of Business:

Current Mailing Address:

4625 RIVERS EDGE VILLAGE LANE, #5301
PONCE INLET, FL 32127

New Mailing Address:

FEI Number: 20-0421041 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHAPMAN, CARL
4625 RIVERS EDGE VILLAGE LANE, #5301
PONCE INLET, FL 32127

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/MEMBERS:

Title:	MGRM	( ) Delete
Name:	CHAPMAN, CARL	
Address:	4625 RIVERS EDGE VILLAGE LANE, #5301	
City-St-Zip:	PONCE INLET, FL 32127	
Title:	MGRM	( ) Delete
Name:	TREADWAY, FREDERICK C	
Address:	9406 PROMONTORY CIRCLE	
City-St-Zip:	INDIANAPOLIS, IN 46236	

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 for the exemption stated in Section 119.07(3)(i), 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: CARL CHAPMAN MGRM 04/07/2004

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