
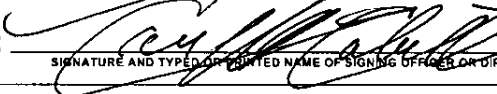


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90443 021 ***150.00

DOCUMENT # L40759 1. Entity Name CHC DEVELOPMENT CO., INC.					
Principal Place of Business 131 PARK LAKE STREET ORLANDO, FL 32803			Mailing Address 131 PARK LAKE STREET ORLANDO, FL 32803		
2. Principal Place of Business - No P.O. Box # 801 N. Orange Avenue Suite, Apt. #, etc. Suite 820 City & State Orlando, FL Zip Country 32801-5203 USA		3. Mailing Address 801 N. Orange Avenue Suite, Apt. #, etc. Suite 820 City & State Orlando, FL Zip Country 32801-5203 USA			
4. FEI Number 59-2988948				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				04192007 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent CAHILL, CARL H. 131 PARK LAKE STREET ORLANDO, FL 32803			7. Name and Address of New Registered Agent Name Cahill, Carl H. Street Address (P.O. Box Number is Not Acceptable) 801 N. Orange Avenue Suite 820 City State Zip Code Orlando FL 32801-5203		
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 		Carl H. Cahill <small>(NOTE: Registered Agent signature required when reinstating)</small>		4/25/07 <small>DATE</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD CAHILL, CARL H. 131 PARK LAKE STREET ORLANDO, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Cahill, Carl H. 801 N. Orange Avenue, Suite 820 Orlando, FL 32801-5203	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CAHILL, GREGORY S 131 PARK LAKE STREET ORLANDO, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Cahill, Gregory S. 801 N. Orange Ave., Suite 820 Orlando, FL 32801-5203	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby 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 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.					
SIGNATURE: 		Carl H. Cahill		4/25/07 <small>Date</small>	
				407-422-5456 <small>Daytime Phone #</small>	