

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L51506

FILED
Feb 25, 2009
Secretary of State

Entity Name: CHAMBLISS DEVELOPMENT CORP.

Current Principal Place of Business:

C/O JOE A CHAMBLISS
201 NW 127TH AVE.
PLANTATION, FL 33325

New Principal Place of Business:

Current Mailing Address:

6550 N FEDERAL HWY
SUITE 240
FT LAUDERDALE, FL 33308 US

New Mailing Address:

FEI Number: 65-0183057 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAMBLISS, JOE A.
201 NW 127TH AVE.
PLANTATION, FL 33325 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: CHAMBLISS, JOE A.
Address: 201 NW 127TH AVE.
City-St-Zip: PLANTATION, FL

Title: D () Delete
Name: CHAMBLISS, JOE A.
Address: 201 NW 127TH AVE.
City-St-Zip: PLANTATION, FL

Title: VST () Delete
Name: CHAMBLISS, GERALDINE M
Address: 201 NW 127TH AVE
City-St-Zip: PLANTATION, FL

Title: D () Delete
Name: MARKS, KIMBERLY M
Address: 3534 DUMBARTON ROAD
City-St-Zip: ATLANTA, GA 30327

Title: D () Delete
Name: MYERS, PAIGE M
Address: 241 CARMEL DR. E.
City-St-Zip: MOBILE, AL 36608

Title: DP () Delete
Name: CHAMBLISS, HUNTER W.
Address: 1202 S.E. 11TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: DP (X) Change () Addition
Name: CHAMBLISS, HUNTER W.
Address: 1700 S.E. 10TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE A CHAMBLISS

CD

02/25/2009

Electronic Signature of Signing Officer or Director

_____ Date