2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009732

FILED Jan 09, 2008 Secretary of State

Entity Name: CHAMBER COURT PROFESSIONAL BUILDING, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	MBER COURT LUCIE, FL 34				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
SUITE 20	MBER COURT 2 LUCIE, FL 34				
FEI Numbe	r: 42-1611026	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
SUITE 20 PORT ST The above n the Stat	. LUCIE, FL 3. e named entity te of Florida.	4986 US	purpose of changing its register	ed office or registered agent, or both,	
SIGNATU		. 0			
	Electro	nic Signature of Registered A		Date	
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTORS	
OFFICER Title: Name: Address: City-St-Zip:	DP (MANCINI, DAV) Delete /ID R COURT, STE 205	Title: Name: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTORS () Change () Addition	
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	DP (MANCINI, DAV 150 CHAMBEI PORT ST LUC VPD (CEGIELSKI, J) Delete /ID R COURT, STE 205 IE, FL 34986) Delete AROSLAW /IBER COURT, STE 201	Title: Name: Address:		
Title: Name: Address:	DP (MANCINI, DAW 150 CHAMBEI PORT ST LUC VPD (CEGIELSKI, J 150 SW CHAN PORT ST LUC STD (JACKSON, GE) Delete PID R COURT, STE 205 IE, FL 34986) Delete AROSLAW MBER COURT, STE 201 IE, FL 34986) Delete ERALD JR MBER COURT, STE 202	Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition	
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	DP (MANCINI, DAV 150 CHAMBEI PORT ST LUC VPD (CEGIELSKI, J 150 SW CHAM PORT ST LUC STD (JACKSON, GE 150 SW CHAM PORT ST LUC D (ZIPPER, JEFF) Delete PID R COURT, STE 205 IE, FL 34986) Delete AROSLAW MBER COURT, STE 201 IE, FL 34986) Delete ERALD JR MBER COURT, STE 202 IE, FL 34986) Delete EREY A MBER COURT, STE 105	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERALD JACKSON, JR. STD 01/09/2008