

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011872

Entity Name: THE CHESS DRUM, INC.

FILED
May 05, 2007
Secretary of State

Current Principal Place of Business:

P. O. BOX 7663
TALLAHASSEE, FL 323147663

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 7663
TALLAHASSEE, FL 32314 US

New Mailing Address:

FEI Number: 41-2160953 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SHABAZZ, DAAIM
2001 OLD ST. AUGUSTINE RD., G106
TALLAHASSEE, FL 32314 US

Name and Address of New Registered Agent:

SHABAZZ, DAAIM
936 SADDLE CREEK RUN
TALLAHASSEE, FL 32301 US

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: DAAIM SHABAZZ

05/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHABAZZ, DAAIM
Address: P. O. BOX 7663
City-St-Zip: TALLAHASSEE, FL 323147663

Title: D () Delete
Name: WILSON, ELVIN
Address: 5246 N. CARLISLE
City-St-Zip: PHILADELPHIA, PA 19141

Title: D () Delete
Name: STANCIL, KIMANI
Address: 1721 BERKELI WAY, APT.
City-St-Zip: BERKELEY, CA 94703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: STANCIL, KIMANI
Address: 1721 BERKLEY WAY, #1
City-St-Zip: BERKELEY, CA 94703

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: DR. DAAIM SHABAZZ

D

05/05/2007

Electronic Signature of Signing Officer or Director

Date