2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N27735

1. Entity Name



FILED Feb 08, 2006 8:00 am Secretary of State

02-08-2006 90010 012 ****70.00

CHAPTE	AN INSTITUTE OF GRAPHIC / R, INC.	No.						
Principal Place P.O. BOX 256 ORLANDO, FI	05	Mailing Address P.O. BOX 2505 ORLANDO, FL 32802-2505						
2. Principal Place of Business 3.		3. Mailing Address					1121 61 1281	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02052006 _C	hg-NP CF	32E037 (11/05)		
City & State		City & State		4. FEI Number 90-005827	73		plied For t Applicable	
Zip	Country	Zip	Country	· · · · · · · · · · · · · · · · · · ·	5. Certificate of S	tatus Desired D	\$8.75 Add Fee Require	
	6. Name and Address of Current Reg	Istered Agent			7. Name and Add	iress of New Regist	ered Agent	
HOPE, TH	OMAS L	-		ame Pa		ngel		
	MINSTER ST), FL 32803		St	treet Address (P.O. Box Number is	Not Acceptable)		
0.00	,,, 2 02000			3331	Benson	Park	Blvd	
			Ci	ity	9~q5		FL Zip Code	32829
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, the obligations of registered agent.								
the configur	CO L CONTROLLES AUGUSTA	_ \) .	θ 0	O2 5	M (
SIGNATURE .	Signeture, typed or printed name of registered agent and to	1 reasuray)	200000000000000000000000000000000000000	and a	when reporting)	02-0	06 - 06	
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Filing Fee is \$61.25 Due by May 1, 2006								
	-	9. Election Camp Trust Fund Co		ncing	\$5.00 May Be Added to Fees		check payable to Department of St	
10.	Due by May 1, 2006 OFFICERS AND DIREC	Trust Fund Co	ntribution.		Added to Fees ADDITIONS/CHANG		Department of SI	tate
10. TITLE NAME	Due by May 1, 2006	Trust Fund Co	ntribution.	Pre-	Added to Fees ADDITIONS/CHANG Sident (Z) Deff	Florida E	Department of St	tate
TITLE NAME STREET ADDRESS	OFFICERS AND DIRECT PHOPE, THOMAS 400 WESTMINSTER ST	Trust Fund Co	11, TITLE NAME STREET AD	Pre- Mat	Added to Fees ADDITIONS/CHANG Sident (2) Deff 9 Virgin	Fiorida E	Department of SI NO DIRECTORS IN Kalendary	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PHOPE, THOMAS 400 WESTMINSTER ST ORLANDO, FL 32803	Trust Fund Co	11, TITLE NAME STREET ADI CITY-ST-Z	Pre- Ma-1 100 pp Oy	Added to Fees ADDITIONS/CHANG Sident Z, Jeff 9 Virgin Lando, Fl	Fiorida E	Department of SI NO DIRECTORS IN Change	i 10 Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PHOPE, THOMAS 400 WESTMINSTER ST ORLANDO, FL 32803 T JACOBS, SHANNON PO BOX 2505	Trust Fund Co	TITLE NAME STREET ADI TITLE NAME STREET ADI STREET ADI STREET ADI STREET ADI	Pre- Mad 100 Pre- Trez	Added to Fees ADDITIONS/CHANG Sident Te, Jeff 9 Virgin Lando, Fl Assurer Bi Denson	Florida E SES TO OFFICERS AN Drive 32803 Parn Blu	Department of SI ND DIRECTORS IN Change Change	i 10 Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2008 OFFICERS AND DIRECT PHOPE, THOMAS 400 WESTMINSTER ST ORLANDO, FL 32803 T JACOBS, SHANNON PO BOX 2505 ORLANDO, FL 328022500 D FOXBURY, KIM	Trust Fund Co	TITLE NAME STREET ADI TITLE NAME STREET ADI STREET ADI STREET ADI STREET ADI	Pre-Mah 100 Pre-Ma	Added to Fees ADDITIONS/CHANG Sident 72, Jeff 9 Virgin Lando, Fl Angel Bi Denson Angel Angel Tetry Tetry The Herry The	Florida E SES TO OFFICERS AI Drive 32803 Park 310 32829 Tenise	Department of St ND DIRECTORS IN Change Change	i 10 Addition
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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 617, 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:	SIGNATURE AND TYPED OR PRINTED HAI	ME OF SIGNING OFFICER OR DIRECTOR	02-04-06 Date	Daytime Phone #	7
0.0	00	Dala A	02-04-06	(400)222-023	a