

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107818

**FILED**  
**Jan 15, 2009**  
**Secretary of State**

**Entity Name:** CHAPPY'S GUIDE AND TOUR, INC.

**Current Principal Place of Business:**

765 E STATE ROAD 78  
NORTHLAKE ESTATES, LOT 244  
LAKEPORT, FL 33471

**New Principal Place of Business:**

1419 SW 30TH STREET  
FORT LAUDERDALE, FL 33315 US

**Current Mailing Address:**

2975 OLD LAKEPORT ROAD  
MOORE HAVEN, FL 33471

**New Mailing Address:**

1419 SW 30TH STREET  
FORT LAUDERDALE, FL 33315

**FEI Number:** 65-1151855

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HENDRY, JOSEPH M II  
606 W SUGARLAND HIGHWAY  
CLEWISTON, FL 33440 US

**Name and Address of New Registered Agent:**

WALLACE, WILLIAM  
1419 SW 30TH STREET  
FORT LAUDERDALE, FL 33315 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: WILLIAM WALLACE

01/15/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: CONWAY, BRETT  
Address: 765 E STATE ROAD 78, LOT 244  
City-St-Zip: LAKEPORT, FL 33471

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SMITH, JAMES  
Address: 1995 NW 193 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: VSTD ( ) Change (X) Addition  
Name: WALLACE, WILLIAM  
Address: 1419 SW 30TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33315 US

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: WILLIAM WALLACE

MGRM

01/15/2009

Electronic Signature of Signing Officer or Director

Date