

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000048246

FILED  
Aug 15, 2006  
Secretary of State

**Entity Name:** CHARTERED FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

PO BOX 211774  
WEST PALM BEACH, FL 33421

**New Principal Place of Business:**

231 WOODLAND ROAD  
PALM SPRINGS, FL 33461

**Current Mailing Address:**

PO BOX 211774  
WEST PALM BEACH, FL 33421

**New Mailing Address:**

231 WOODLAND ROAD  
PALM SPRINGS, FL 33461

**FEI Number:** 37-1428981

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANDERSON, DONOVAN A  
1870 ABBEY ROAD  
914  
WEST PALM BEACH, FL 33415 US

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

ANDERSON, DONOVAN A  
231 WOODLAND ROAD  
PALM SPRINGS, FL 33461 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:** DONOVAN ANDERSON

08/15/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ANDERSON, DONOVAN A  
Address: PO BOX 211774  
City-St-Zip: WEST PALM BEACH, FL 33421

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

Title: P (X) Change ( ) Addition  
Name: ANDERSON, DONOVAN A  
Address: 231 WOODLAND ROAD  
City-St-Zip: PALM SPRINGS, FL 33461

I hereby certify that the information supplied with this filing does not qualify for the 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:** DONOVAN ANDERSON

P

08/15/2006

Electronic Signature of Signing Officer or Director

Date