

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063903

FILED
Apr 26, 2005
Secretary of State

Entity Name: CHUGGER'S SPORTS BAR & GRILL, INC.

Current Principal Place of Business:

9539 E. FOWLER AVE
THONOTOSASSA, FL 33592

New Principal Place of Business:

Current Mailing Address:

9539 E. FOWLER AVE
THONOTOSASSA, FL 33592

New Mailing Address:

FEI Number: 04-3687992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWSON, MONICA Z
2403 STATE STREET
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPDS () Delete
Name: MILEY, SHATAKA
Address: 10208 N. 28TH ST.
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: HILEY, KAREN N
Address: 3012 LAUREL LN.
City-St-Zip: PLANT CITY, FL 33566

Title: D (X) Delete
Name: FEAGLE, DONALD G
Address: 10509 MAIN ST. - PO BOX 1404
City-St-Zip: THONOTOSASSA, FL 33592

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MILEY, KAREN N
Address: 3012 LAUREL LN.
City-St-Zip: PLANT CITY, FL 33566

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: S. N. MILEY

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

Date