

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000081120

Entity Name: CHAR DESIGN, INC.

**FILED**  
**Apr 04, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3308 BLACK OAK CT  
BOYNTON BEACH, FL 33436

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 228  
LAKE WORTH, FL 33460

**New Mailing Address:**

3308 BLACK OAK CT  
BOYNTON BEACH, FL 33436

FEI Number: 75-3074693

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROEGIERS, SUSAN E  
1375 SABAL LAKES RD.  
DELRAY BEACH, FL 33445 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CONKLIN, CHARLENE M  
Address: 3308 BLACK OAK CT  
City-St-Zip: BOYNTON BEACH, FL 33436

I hereby 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 all other like empowered.

SIGNATURE: CHARLENE M CONKLIN

PRES

04/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date