

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 31, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000059309**

1. Entity Name  
**CHESTER AND COMPANY CORPORATION**



Principal Place of Business  
**808 MABBETTE ST  
KISSIMMEE, FL 34741**

Mailing Address  
**928 SAN RAPHAEL ST  
KISSIMMEE, FL 34759**



03252008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**04-3760748**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**MELITON, MELITA E  
928 SAN RAPHAEL ST  
KISSIMMEE, FL 34759**

**DO NOT WRITE  
IN THIS SPACE**

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, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

*Melita E. Meliton*

(NOTE: Registered Agent signature required when reinstating)

*March 27, 2008*  
DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	<b>P</b>
NAME	<b>NICDAO, CARMELITA O</b>
STREET ADDRESS	<b>928 SAN RAPHAEL ST</b>
CITY-ST-ZIP	<b>KISSIMMEE, FL 34759</b>
TITLE	<b>ST</b>
NAME	<b>MELITON, MELITA E</b>
STREET ADDRESS	<b>928 SAN RAPHAEL ST</b>
CITY-ST-ZIP	<b>KISSIMMEE, FL 34759</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000876295  
04/11/08-80068-006 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Melita E. Meliton* - MELITA E. MELITON

*March 27, 2008 (407) 973-9442*