

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000089460

1. Entity Name
CHEFANDRN, INC.



Principal Place of Business
**1542 WATER TOWER CIRCLE
THE VILLAGES, FL 32159**

Mailing Address
**1542 WATER TOWER CIRCLE
THE VILLAGES, FL 32159**



03112008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0152220

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

**RICE, CHARLES
1504 PINE RIDGE DAIRY ROAD
FRUITLAND PARK, FL 34731**

**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.

(NOTE: Registered Agent signature required when reinstating)

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**

04/07/08-80021-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RICE, CHARLES
STREET ADDRESS	1504 PINE RIDGE DAIRY ROAD
CITY-ST-ZIP	FRUITLAND PARK, FL 34731

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

**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: *Charles Rice*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/16/08 352-
408-5003

Daytime Phone #