

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2006 8:00 am
Secretary of State

07-11-2006 90017 031 ***150.00

DOCUMENT # P04000061285 1. Entity Name GENERAL CHESTER'S PAINTBALL, INC.			
Principal Place of Business 1308-1 MALABA RD PALM BAY, FL 32909		Mailing Address 1308-1 MALABA RD PALM BAY, FL 32909	
2. Principal Place of Business 764 GELASO ST. SW.		3. Mailing Address 764 GELASO ST SW.	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State PALM BAY FL		City & State PALM BAY FL	
Zip 32908		Zip 32908	
Country USA		Country USA	
4. FEI Number 20-1001203		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOMBRIANT, CHESTER III 1308-1 MALABA ROAD PALM BAY, FL 32909		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 764 GELASO ST. SW City PALM BAY FL Zip Code 32908	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: DPS <input type="checkbox"/> Delete NAME: BOMBRIANT, CHESTER III STREET ADDRESS: 1308-1 MALABA RD CITY-ST-ZIP: PALM BAY, FL 32909		TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME: 764 GELASO ST. SW STREET ADDRESS: PALM BAY FL 32908 CITY-ST-ZIP: PALM BAY FL 32908	
TITLE: DT <input type="checkbox"/> Delete NAME: BOMBRIANT, KATHLEEN STREET ADDRESS: 1308-1 MALABA RD CITY-ST-ZIP: PALM BAY, FL 32909		TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME: 764 GELASO ST. SW STREET ADDRESS: PALM BAY FL 32908 CITY-ST-ZIP: PALM BAY FL 32908	
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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 <u>Kathleen Bombriant / KATHLEEN BOMBRIANT</u> 7/6/06 321-537-9789 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			