

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000101699

Entity Name: CHRIANE, INC.

**FILED**  
**Feb 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

8496 YORKE RD  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

**Current Mailing Address:**

8496 YORKE RD  
WELLINGTON, FL 33414 US

**New Mailing Address:**

FEI Number: 94-2004439

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BENDER, DIANE L  
8496 YORKE ROAD  
WELLINGTON, FL 33414 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: P  
Name: BENDER, CHRIS S  
Address: 8496 YORKE RD  
City-St-Zip: WELLINGTON, FL 33414 US

Title: SECT  
Name: BENDER, CHRIS S  
Address: 8496 YORKE RD  
City-St-Zip: WELLINGTON, FL 33414 US

Title: TREA  
Name: BENDER, CHRIS S  
Address: 8496 YORKE RD  
City-St-Zip: WELLINGTON, FL 33414 US

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: CHRIS BENDER

PRES

02/18/2012

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

\_\_\_\_\_  
Date