

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000154159

Entity Name: CHILSON APPLE TRIM, INC.

**FILED**  
**Aug 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

80 BEACH DR. W.  
MIRAMAR BEACH, FL 32550

**New Principal Place of Business:**

65 TANGLEWOOD DR  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

80 BEACH DR. W.  
MIRAMAR BEACH, FL 32550

**New Mailing Address:**

65 TANGLEWOOD DR  
SANTA ROSA BEACH, FL 32459

FEI Number: 20-1975598

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

APPLE, WILLIAM F 2ND  
80 BEACH DR. W.  
MIRAMAR BEACH, FL 32550 US

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

APPLE, WILLIAM F 2ND  
65 TANGLEWOOD DR  
SANTA ROSA BEACH, FL 32459 US

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: WILLIAM F APPLE 2ND

08/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: APPLE, WILLIAM F 2ND  
Address: 65 TANGLEWOOD DR  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: V  
Name: APPLE, LISA  
Address: 65 TANGLEWOOD DR  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: WILLIAM F APPLE 2ND

P

08/30/2012

Electronic Signature of Signing Officer or Director

Date