

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 28, 2005 8:00 am
Secretary of State

02-24-2005 90037 013 ***150.00

DOCUMENT # P04000161518 1. Entity Name DEREK CHORLTON; P.A.																									
Principal Place of Business 2843 TIBURON BOULEVARD, #101 NAPLES FL 34109			Mailing Address 2843 TIBURON BOULEVARD, #101 NAPLES FL 34109																						
2. Principal Place of Business 2377 LINWOOD AVE Suite, Apt. #, etc. # 211		3. Mailing Address 2377 LINWOOD AVE Suite, Apt. #, etc. # 211																							
City & State NAPLES FL		City & State NAPLES FL		4. FEI Number APPLIED FOR																					
Zip 34112		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																					
6. Name and Address of Current Registered Agent GRANT, SCOTT M 3337 TAMiami TRAIL N. NAPLES FL 34103			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____																						
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, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ☐ Added to Fees																						
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 85%;"> DEREK CHORLTON ☐ Delete 2377 LINWOOD AVE # 211 NAPLES FL 34112 </td> </tr> <tr> <td>TITLE</td> <td>_____ ☐ Delete</td> </tr> <tr> <td>NAME</td> <td>_____</td> </tr> <tr> <td>STREET ADDRESS</td> <td>_____</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>_____</td> </tr> </table>			TITLE	DEREK CHORLTON ☐ Delete 2377 LINWOOD AVE # 211 NAPLES FL 34112	TITLE	_____ ☐ Delete	NAME	_____	STREET ADDRESS	_____	CITY-ST-ZIP	_____	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 85%;"> ☐ Change ☒ Addition DEREK CHORLTON 2843 TIBURON BLVD # 101 NAPLES FL 34109 </td> </tr> <tr> <td>TITLE</td> <td>_____ ☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>_____</td> </tr> <tr> <td>STREET ADDRESS</td> <td>_____</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>_____</td> </tr> </table>			TITLE	☐ Change ☒ Addition DEREK CHORLTON 2843 TIBURON BLVD # 101 NAPLES FL 34109	TITLE	_____ ☐ Change ☐ Addition	NAME	_____	STREET ADDRESS	_____	CITY-ST-ZIP	_____
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DEREK CHORLTON

2-18-05

239-777-9839