## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## May 23, 2005 8:00 am Secretary of State **DOCUMENT # P04000167373** 05-23-2005 90008 023 \*\*\*150.00 1. Entity Name CHB CONSULTING, INC. Principal Place of Business Mailing Address 962 BAYWARD PLACE 962 BAYWARD PLACE ROCKLEDGE, FL 32955 ROCKLEDGE, FL 32955 2. Principal Place of Business 3. Mailing Address Suite Ant # etc. Suite, Apt. #, etc. 02282005 Chg-P CR2E034 (10/03) Applied For City & State City & State 4. FEI Number Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WILLIAMS, WATER V Street Address (P.O. Box Number is Not Acceptable) 962 BAYWARD PLACE ROCKLEDGE, FL 32955 City 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 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME WILLIAMS, WALTER V JR 962 BAYWARD PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ROCKLEDGE, FL 32955 CITY-ST-ZIP STD TITLE ☐ Delete TITLE Change ☐ Addition WILLIAMS, LOIS A NAME NAME 962 BAYWARD PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ROCKLEDGE, FL 32955 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP T(T) F TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 light empowered.

**FILED** 

ACHNENT 962 Bayward Place, Rockledge, FL 32955 321-635-8745 Office / 321-617-7689 Fax

www.chb-consulting.com

April 15, 2005

Dear Sir or Madam:

Enclosed is the form and payment you requested.

I have been trying to find out why I need to pay this fee when I did not incorporate until Jan 1, 2005, or at least that is what I told my lawyer to do.

In reviewing my incorporation papers, it looks like we were incorporated right at the end of 2004. Rather than cause my company a problem, I am submitting this check and form to and will try to straighten it out over the next month or so when I finish a major project I am involved in.

Sincerely yours,

Walter V. Williams, Jr.

President - CHB-Consulting, Inc.

321-536-1103 Cell

Walt@CHB-Consulting.Com E-Mail