

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 26, 2006 8:00 am**  
**Secretary of State**

01-26-2006 90042 006 \*\*\*150.00

<b>DOCUMENT # P05000028170</b> 1. Entity Name <b>CHANTAL GRADLER, P.A.</b>																																																					
Principal Place of Business <b>P O BOX 250616</b> <b>DAYTONA BEACH, FL 32125 US</b>			Mailing Address <b>P O BOX 250616</b> <b>DAYTONA BEACH, FL 32125 US</b>																																																		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																																																		
4. FEI Number <b>80-2375923</b>			Applied For <input type="checkbox"/> Not Applicable																																																		
5. Certificate of Status Desired <input type="checkbox"/>			<b>\$8.75</b> Additional Fee Required																																																		
6. Name and Address of Current Registered Agent <b>LAIBLE, JULIE E.A.</b> <b>121 DUNDEE RD</b> <b>DAYTONA BEACH, FL 32118</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 <i>Julie Laible E.A.</i> <b>Julie Laible E.A.</b> <span style="float: right;"><b>1/16/06</b></span> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																			
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 60%;"> <b>P</b>  <b>GRADLER, CHANTAL</b>  <b>P O BOX 250616</b>  <b>DAYTONA BEACH, FL 32125</b> </td> <td style="width: 20%; text-align: right;"> <input type="checkbox"/> Delete         </td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>GRADLER, CHANTAL</b> <b>P O BOX 250616</b> <b>DAYTONA BEACH, FL 32125</b>	<input type="checkbox"/> Delete																						11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 60%;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> <td style="width: 20%; text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition																					
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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.																																																					
<b>SIGNATURE: <i>Chantal Gradler 1-21-06</i> Chantal GRADLER, P.A.</b> <span style="float: right;"><b>386-212-4973</b></span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																					