2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000104074

1. Entity Name

A CHARTER WORLD, INC.



FILED Apr 23, 2007 08:00 AM Secretary of State

Principal Place of Business

6932 CINDERELLA RD. JACKSONVILLE, FL 32210 Mailing Address

6932 CINDERELLA RD. JACKSONVILLE, FL 32210



DO NOT WRITE IN THIS SPACE

04202007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2490150

Applied For Not Applicable

5. Certificate of Status Desired

X \$8.75 Additional

6. Name and Address of Current Registered Agent

HESTER, LINDA M. 12858 HAWK CREST PLACE JACKSONVILLE, FL 32258

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the obl	igations of registered agent.		-		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) OATE					
After	FILE NOW!!! FEE IS \$150.00 • May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS				
TITLE	DP				

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

HESTER, JAMES H. NAME STREET ADDRESS 6932 CINDERELLA RD. CITY-ST-ZIP JACKSONVILLE, FL 32210 TITLE O'NEILL, FRANK E. JR. NAME STREET ADDRESS 9909 APPLE VALLEY CT. CHARLOTTE, NC 28269 CITY-ST-ZIP TITLE HESTER, LINDA M. NAME STREET ADDRESS 12858 HAWK CREST PLACE JACKSONVILLE, FL 32258 CITY-ST-ZIP TITLE NAME HESTER, NANCY D. STREET ADDRESS 6932 CINDERELLA RD. CITY-ST-ZIP JACKSONVILLE, FL 32210 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

000000723588 05/02/07-80076-020 158.75

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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.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

James W. Hertin

James H. Hester - President

4/21/07

(904)778-2353

Daytime Phone #