2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000145078 1. Entity Name **GARY D CHENOT INC** Mailing Address Principal Place of Business 1451 ROYAL FOREST PLACE 1451 ROYAL FOREST PLACE

LAKELAND, FL 33811 US

FILED Apr 30, 2007 08:00 A Secretary of State

\$8.75 Additional

Fee Required



5. Certificate of Status Desired

DO NOT WRITE IN THIS SPACE

LAKELAND, FL 33811

4262007	No Chg-P	CR2E034 (11/05)	
FEI Number			Applied For
20-3707088		Г	Not Applicable

6. Name and Address of Current Registered Agent DO NOT WRITE CHENOT, GARY D 1451 ROYAL FOREST PLACE LAKELAND, FL 33811 IN THIS SPACE

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, typed or printed name of registered agent and title if applicable.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

000000748341 05/17/07-80064-013 150.00

OFFICERS AND DIRECTORS 10. TITLE NAME CHENOT, GARY D STREET ADDRESS 1451 ROYAL FOREST PLACE CITY-ST-ZIP LAKELAND, FL 33811 TITLE CHENOT, PATTI A NAME 1451 ROYAL FOREST PLACE STREET ADDRESS LAKELAND, FL 33811 CITY+ST-7IP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS City-St-ZiP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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 triar 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 in Block 12 or Block 11 in Block 10 or Block 11 in Block 11 in Block 10 or Block 11 in B changed, or on an attachment wij

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #