

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000078375

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** CHIEFLAND DEVELOPMENT, INC.

**Current Principal Place of Business:**

4900 INDRIIO ROAD  
FT PIERCE, FL 34951

**New Principal Place of Business:**

2701 INDUSTRIAL AVE 2  
FT PIERCE, FL 34946

**Current Mailing Address:**

4900 INDRIIO ROAD  
FT PIERCE, FL 34951

**New Mailing Address:**

2701 INDUSTRIAL AVE 2  
FT PIERCE, FL 34946

**FEI Number:** 03-0595531

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOLDEN, DAVID D  
4900 INDRIIO ROAD  
FT PIERCE, FL 34951 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: S  
Name: GOLDEN, DAVID D  
Address: 4900 INDRIIO ROAD  
City-St-Zip: FT PIERCE, FL 34951

Title: VP  
Name: GOLDEN, DIANNE M  
Address: 4900 INDRIIO ROAD  
City-St-Zip: FT PIERCE, FL 34951

Title: T  
Name: LONG, JAMES T  
Address: 5824 SPRING LAKE TERRACE  
City-St-Zip: FT PIERCE, FL 34951

Title: P  
Name: LONG, MELISSA A  
Address: 5824 SPRING LAKE TERRACE  
City-St-Zip: FT PIERCE, FL 34951

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MELISSA LONG

P

02/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date