2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000107304

Entity Name: CHRONICLE FINANCIAL SERVICES, INC.

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3760 FALLSCREST CIRCLE 1105 BOWMAN STREET CLERMONT, FL 34711 CLERMONT, FL 34711

Current Mailing Address: New Mailing Address:

3760 FALLSCREST CIRCLE 1105 BOWMAN STREET CLERMONT, FL 34711 CLERMONT, FL 34711

FEI Number: 26-1142829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHAMBERS, EASTON

3760 FALLSCREST CIRCLE

CLERMONT, FL 34711 US

CHAMBERS, EASTON P
1105 BOWMAN STREET
CLERMONT, FL 34711 US

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: EASTON CHAMBERS 01/19/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CHAMBERS, EASTON CHAMBERS, EASTON Name: Name: 1105 BOWMAN STREET 3760 FALLSCREST CIRCLE Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 CHAMBERS, TANYA
 Name:
 CHAMBERS, TANYA

 Address:
 3760 FALLSCREST CIRCLE
 Address:
 1105 BOWMAN STREET

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: EASTON CHAMBERS P 01/19/2009