

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000013290

Entity Name: CHARTWELL GROUP, INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

5272 WESTMINSTER DR
FT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

PO. BOX 60964
FT MYERS, FL 33906 US

New Mailing Address:

FEI Number: 65-0375231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHOADES, JOHN W
5272 WESTMINSTER DRIVE
FT MYERS, FL 33919 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RHOADES, JOHN W
Address: PO BOX 60964 N/A
City-St-Zip: FT. MYERS, FL 33906

Title: STD () Delete
Name: RHOADES, MARY A
Address: PO BOX 60964 N/A
City-St-Zip: FT. MYERS, FL 33906

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RHOADES, JOHN W
Address: 5272 WESTMINSTER DRIVE
City-St-Zip: FT. MYERS, FL 33919

Title: STD (X) Change () Addition
Name: RHOADES, MARY A
Address: 5272 WESTMINSTER DRIVE
City-St-Zip: FT. MYERS, FL 33919

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: JOHN W. RHOADES

PD

03/23/2009

Electronic Signature of Signing Officer or Director

Date