2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000010335

1. Entity Name

CHALAIRE AND ASSOCIATES, INC.



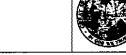
FILED Apr 27, 2006 08:00 AN Secretary of State

Principal Place of Business

4362 NORTHLAKE BLVD

SUITE 206

PALM BEACH GARDENS, FL 33410



Mailing Address

125 BOWSPRIT DRIVE

NORTH PALM BEACH, FL 33408



04242006

No Chg-P

CR2E034 (11/05)

€.	FEI Number
	65-0470286

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

(561)

694-0336

6.	Name	and	Address	of	Current	Regis	stered.	Agent

DO NOT WRITE IN THIS SPACE

CHALAIRE, DONALD K 125 BOWSPRIT DRIVE

DO NOT WRITE

NORTH PA	ALM BEACH, PL 33408		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_										
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees						
10.	OFFICERS AND DIREC	TORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHALAIRE, DONALD K 125 BOWSPRIT DR NORTH PALM BEACH, FL 33408				U00000539715 05/09/06-80107-025 150.00					
TITLE NAME STREET ADDRESS CITY-SY-ZIP	D CHALAIRE, TERRI L 16425 HAYNIE LANE JUPITER, FL 33478				02/03/06-8010/-022 120.00					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE					
title Name Street address City-St-Zip				IN '	THIS SPACE					
TITLE NAME STREET AUDRESS CITY-ST-ZIP										
TITLE NAME STREET ADDRESS CITY-SI-ZIP										
12. I hereby certify that the information supplied with this filling 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 eath; 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.										

Terri Chalaire