

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P94000073247

1. Entity Name
CHANCEY RADIATOR SERVICE OF BARTOW, INC.



Principal Place of Business
1330 E. GAY STREET
BARTOW, FL 33830

Mailing Address
1330 E. GAY STREET
BARTOW, FL 33830

DO NOT WRITE IN THIS SPACE

**FILED
Mar 16, 2007 8:00 am
Secretary of State**

03-16-2007 90038 015 ***150.00

20007636



03092007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3269490	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHANCEY, HERBERT E
1330 E. GAY STREET
BARTOW, FL 33830

**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**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

10. OFFICERS AND DIRECTORS

TITLE PSD
NAME CHANCEY, HERBERT E
STREET ADDRESS 1330 E. GAY STREET
CITY-ST-ZIP BARTOW, FL 33830

TITLE VT
NAME CHANCEY, DOW E
STREET ADDRESS 1330 E. GAY ST.
CITY-ST-ZIP BARTOW, FL 33830

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 that 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Herbert E. Chancey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #