2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000078487

1. Entity Name

CHURINDA PROPERTIES, INC.



Apr 11, 2007 08:00 Al Secretary of State

FILED

Not Applicable

\$8.75 Additional

407-862,9679

Daytime Phone #

Fee Required

Principal Place of Business

253 DONEGAL COURT ALTAMONTE SPRINGS, FL 32714 Mailing Address

253 DONEGAL COURT ALTAMONTE SPRINGS, FL 32714



) (64) (44) (44)		
	02182007	No Chg-P	CR2E034 (11/05)
WRITE IN THIS SPACE	4. FEI Number		Applied For

6. Name and Address of Current Registered Agent

SIMMERSON, DORINDA 253 DONEGAL COURT ALTAMONTE SPRINGS, FL 32714

SIGNATURE:

DO NOT

DO NOT WRITE IN THIS SPACE

.72-07

59-3273246

5. Certificate of Status Desired

			*	
	named entity submits this statement for the plans of registered agent.	ourpose of changing its registere	d office or registered agent, or t	both, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable (NOTE, Registered	Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SIMMERSON, DORINDA 253 DONEGAL COURT ALTAMONTWE SPRINGS, FL	CTORS	,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DC	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U00000701611 04/20/07-80064-009 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
indicated of the cor	on this report or supplemental report is true :	and accurate and that my signat d to execute this report as requir	ure shall have the same legal eff	19. Florida Statutes, I further certify that the information fect as if made under oath; that I am an officer or director utes; and that my name appears in Block 10 or Block 11 if