

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 17, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P94000078585**

1. Entity Name  
C.G. CHASE CONSTRUCTION MANAGEMENT, INC.



Principal Place of Business  
1566 SW 1ST STREET  
MIAMI, FL 33135

Mailing Address  
1566 SW 1ST STREET  
MIAMI, FL 33135

**DO NOT WRITE IN THIS SPACE**



04142008 No Chg-P CR2E034 (11/05)

4. FEI Number  
90-0056366

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

ROSENBERG, DONALD S  
1 S.E. 3RD AVE.  
SUITE 3000  
MIAMI, FL 33131

**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, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000904636  
05/01/08-80020-021 158.75

**10. OFFICERS AND DIRECTORS**

TITLE	DP
NAME	CHASE, CLARENCE G
STREET ADDRESS	11566 SW 1ST STREET
CITY-ST-ZIP	MIAMI, FL 33135
TITLE	VP
NAME	WHELPLEY, DAVID
STREET ADDRESS	1566 SW 1ST STREET
CITY-ST-ZIP	MIAMI, FL 33135
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID WHELPLEY

4-15-08

Date

305-381-6886

Daytime Phone