

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000008382

FILED
Feb 27, 2008
Secretary of State**Entity Name:** CHESTERBROOK PARTNERS INC.**Current Principal Place of Business:**325 NE 2ND AVE.
203
DELRAY BEACH, FL 33444 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 7233
DELRAY BEACH, FL 33482**New Mailing Address:****FEI Number:** 65-0553214 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ELGART, NED H
325 NE 2ND AVE. #203
DELRAY BEACH, FL 33444 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

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: ELGART, NED H
Address: P.O. BOX 7233
City-St-Zip: DELRAY BEACH, FL 33482**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** S () Change (X) Addition
Name: BALZER, LESLIE A
Address: 4992 GRUNDY WAY
City-St-Zip: DOYLESTOWN, PA 18901

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: NED H ELGART

PD

02/27/2008

Electronic Signature of Signing Officer or Director

Date