2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Secretary of State 03-29-2005 90017 038 ***150.00 **DOCUMENT # P95000075255** CHAPLIN & CHAPLIN, INC. Principal Place of Business Mailing Address 5190 OVERSEAS HWY 5190 OVERSEAS HWY MARATHON, FL 33050 US MARATHON, FL 33050 US 03142005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0629530 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHAPLIN, F. JAMES DO NOT WRITE 5190 OVERSEAS HIGHWAY MARATHON, FL 33050 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. D TITLE CHAPLIN, F. JAMES NAME 5190 OVERSEAS HWY STREET ADDRESS CITY-ST-ZIP MARATHON, FL 33050 TITLE CHAPLIN, BETTYE B NAME STREET ADDRESS 5190 OVERSEAS HWY MARATHON, FL 33050 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 a address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS CITY-ST-ZIP

NG OFFICER OF DIRECTOR

305·743-942

FILED

Mar 29, 2005 8:00 am