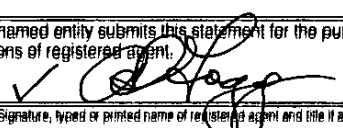
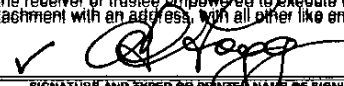


2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000058270 1. Entity Name CHIMNEY POINT MANAGEMENT, INC.						FILED 05 APR 27 PM 6:45 SECRETARY OF STATE TALLAHASSEE, FLORIDA 	
Principal Place of Business 13607 N.W. 50TH AVE. GAINESVILLE, FL 32606				Mailing Address 13607 N.W. 50TH AVE. GAINESVILLE, FL 32606			
2. Principal Place of Business				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 59-3391211				Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent FOGG, ALAN S 217 S PLANTATION CIRCLE PONTE VERDE BEACH, FL 32082				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 13607 N.W. 50th Ave City Gainesville FL Zip Code 32606			
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 				DATE 4/8/05			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when terminating)				DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D FOGG, ALAN S 13607 N.W. 50TH AVE. GAINESVILLE, FL 32606	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D FOGG, JEAM M 13607 N.W. 50TH AVE. GAINESVILLE, FL 32606	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D FOGG, JEAM M 13607 N.W. 50TH AVE. GAINESVILLE, FL 32606	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D FOGG, JEAM M 13607 N.W. 50TH AVE. GAINESVILLE, FL 32606	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition		
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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 an address, with all other like empowered.							
SIGNATURE: 				DATE 4/8/05			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DAYTIME PHONE #			

5/4/00