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07 JUN 22 PM 1:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000007043				<p>FILED</p> <p>07 JUN 22 PM 1:38</p> <p>SECRETARY OF STATE</p> <p>TALLAHASSEE, FLORIDA</p>																							
1. Entity Name CHARTWELL PROPERTY DEVELOPMENT AND INVESTMENT INC.																											
Principal Place of Business 131 MAIN STREET OSPREY, FL 34229 US		Mailing Address 131 MAIN STREET OSPREY, FL 34229 US		  05/02/06 90227 033 \$150.00 04302007 Chg-P CR2E034 (12/06)																							
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address 800 S. OSPREY AVE Suite, Apt. #, etc.																									
City & State City: Zip: Country:		City & State SARASOTA FL Zip: 34236 Country: USA																									
4. FEI Number 65-0781769		Applied For <input checked="" type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																								
COMPTON, JOHN 1819 MAIN ST STE 610 SARASOTA, FL 34236			Name																								
			Street Address (P.O. Box Number is Not Acceptable)																								
			City: FL Zip Code:																								
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 _____ <small>(Signature, typed or printed name of registered agent and title if applicable.)</small> <small>(NOTE: Registered Agent signature required when reinstating)</small> <small>DATE</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																							
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
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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: <u> </u> 4-29-07																											
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Daytime Phone #)																											