
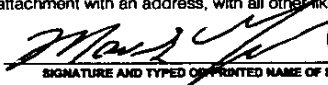


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2006 8:00 am
Secretary of State

07-10-2006 90027 022 ***550.00

DOCUMENT # P97000046194 1. Entity Name CHASE MOVING & SERVICE, INC.																													
Principal Place of Business 413 CANCUN CT JACKSONVILLE, FL 32259			Mailing Address 413 CANCUN CT JACKSONVILLE, FL 32259																										
2. Principal Place of Business 1374 Wentworth Ave. Suite, Apt. #, etc.			3. Mailing Address 1374 Wentworth Ave. Suite, Apt. #, etc.																										
City & State Jacksonville, Florida Zip 32259		City & State Jacksonville, Florida Zip 32259		4. FEI Number 59-3452096																									
Country U.S.		Country U.S.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent LEBOEUF, LAMB, GREENE & MACRAE ATTN: KIMBERLEY DAHLBERG 50 N LAURA STREET SUITE 2800 JACKSONVILLE, FL 32202				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																													
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:65%;">D RADFORD, MARK S</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>413 CANCUN CT</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>JACKSONVILLE, FL 32259</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	D RADFORD, MARK S	<input type="checkbox"/> Delete	NAME	413 CANCUN CT		STREET ADDRESS	JACKSONVILLE, FL 32259		CITY-ST-ZIP			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:65%;">Mark S. Radford</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>1374 Wentworth Ave.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>Jacksonville, FL 32259</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	Mark S. Radford	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	1374 Wentworth Ave.		STREET ADDRESS	Jacksonville, FL 32259		CITY-ST-ZIP		
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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:  5/30/06 904 260 8889 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																													