

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000092273

Entity Name: C.H.I. PROPERTIES, INC.

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

2665 N.E. 37TH DRIVE
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

2665 N.E. 37TH DRIVE
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 65-0798838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLSAPS, FRED R
2665 NE 37TH DRIVE
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

MILLSAPS, STEVE
2665 NE 37TH DRIVE
FORT LAUDERDALE, FL 33308 US

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: STEVE MILLSAPS

04/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: MILLSAPS, WALTER S
Address: 11628 HIDDEN HILLS DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: DPTS () Delete
Name: MILLSAPS, STEPHEN H
Address: 2665 NE 37TH DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D (X) Delete
Name: MILLSAPS, JUDITH G
Address: 2063 ST. ANDREWS DRIVE
City-St-Zip: BERWYN, PA 19312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DPTS (X) Change () Addition
Name: MILLSAPS, STEVE
Address: 2665 NE 37TH DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVE MILLSAPS

DPTS

04/24/2007

Electronic Signature of Signing Officer or Director

Date