



**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 05, 2008 08:00 AM
Secretary of State

DOCUMENT # P99000021032 1. Entity Name CHADICK & ASSOCIATES, INC.	
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Principal Place of Business 1110 JUNG BLVD. EAST NAPLES, FL 34120-3438	Mailing Address 1110 JUNG BLVD. EAST NAPLES, FL 34120-3438
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DO NOT WRITE IN THIS SPACE

	
03022008	No Chg-P CR2E034 (11/05)
4. FEI Number 59-3560964	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CHADICK, SUSAN B 1110 JUNG BLVD. EAST NAPLES, FL 34120-3438	DO NOT WRITE IN THIS SPACE
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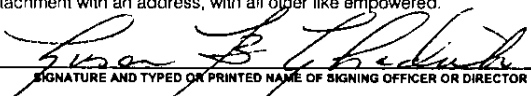
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>		DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHADICK, WILLIAM D 1110 JUNG BLVD. E. NAPLES, FL 34120
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHADICK, SUSAN B 1110 JUNG BLVD. E. NAPLES, FL 34120
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03/19/08-80029-019 150.00

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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: 	Date 3-3-08	Daytime Phone # 239-353-9350
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		