

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2004 8:00 am
Secretary of State

05-07-2004 90131 031 ***150.00

DOCUMENT # S35842

1. Entity Name
CHC INDUSTRIES, INC.



Principal Place of Business
P. O. BOX 9100
PALM HARBOR, FL 34682

Mailing Address
P. O. BOX 9100
PALM HARBOR, FL 34682

54053320



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05032004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number
38-0427355

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PARATO, VITO
3055 RUEN DRIVE
PALM HARBOR, FL 34685

Name **BILL MACLOWEY**
Street Address (P.O. Box Number is Not Acceptable)
SAME
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 **William MacLowey VP CFO** DATE **5/1/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Delete
NAME **HARMER, ROHN**
STREET ADDRESS **3055 RUEN DRIVE**
CITY-ST-ZIP **PALM HARBOR, FL**

TITLE **ROBERT STEPHENSON** ☐ Change ☒ Addition
NAME **3055 RUEN DR**
STREET ADDRESS **PALM HARBOR FL**
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **SNYDER, RICHARD**
STREET ADDRESS **3055 RUEN DRIVE**
CITY-ST-ZIP **PALM HARBOR, FL**

TITLE **TENNENCE RUEN** ☐ Change ☒ Addition
NAME **3055 RUEN DR**
STREET ADDRESS **PALM HARBOR FL**
CITY-ST-ZIP

TITLE **T** ☒ Delete
NAME **PALOMBO, ANTHONY**
STREET ADDRESS **3055 RUEN DRIVE**
CITY-ST-ZIP **PALM HARBOR, FL**

TITLE **BILL MACLOWEY** ☐ Change ☒ Addition
NAME **3055 RUEN DR**
STREET ADDRESS **PALM HARBOR FL**
CITY-ST-ZIP

TITLE **PD** ☒ Delete
NAME **PARATO, VITO**
STREET ADDRESS **3055 RUEN DRIVE**
CITY-ST-ZIP **PALM HARBOR, FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **BRENNAN, BROOKE**
STREET ADDRESS **3055 RUEN DRIVE**
CITY-ST-ZIP **PALM HARBOR, FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **William MacLowey** DATE **5/1/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR