2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 07, 2005 8:00 am Secretary of State

DOCUMENT # S49322 1. Entity Name THE JOHN D. CHAPMAN COMPANY, INC.						02-07-2005 9	0085 03	0 ***150).00
Principal Plac	ce of Business	Mailing Address							
8431 IMMOKOLSEE RD			8431 IMMOKOLSEE RD						_
		FT PIERCE, FL 34951	US				500	1087	2
					LANDRON III UII	ICO (BIOM (III) MISIM DOS			
2. Principal Place of Business		3. Mailing Address		 ,					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		· —	01262005	Chg-P	CR2E0	34 (10/03)	
City & State		City & State			4. FEI Number 59-30629	987			oplied For
Zip Country		Zip	Country		5. Certificate of	Status Desired		\$8.75 Add	
	8. Name and Address of Currer	nt Registered Agent			7. Name and A	ddress of New Re	gistered A	Agent	
OLIADIAA	I IOUND			Name				_	
CHAPMAN, JOHN D. 8431 IMMOKOLEE RD FT PIERCE, FL 34951				Street Address (P.O. Box Number is Not Acceptable)					
	L, (L 3433)	*							
				City			FL	Zip Cod	e
	named entity submits this statement tions of registered agent.	for the purpose of changing its	registere	ed office or register	red agent, or both,	in the State of Flor		amiliar with,	and accept
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOTE	- Panistorno	d Agent signature required	t whos extretation)	<u></u>	DATE		
	Signature, typed or printed hazire or registered age	ių and tite ii applicable. (NO16	c, neglateret	1 Affaul miname reduited	s when reviewed ()		UAIE		
		1			1				
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550	9. Election Campai Trust Fund Conti			.00 May Be led to Fees				
	ay 1, 2005 Fee will be \$550 OFFICERS AN	D DIRECTORS			ed to Fees	HANGES TO OFFI	CERS AND		
10.	ay 1, 2005 Fee will be \$550 OFFICERS AN	D DIRECTORS Delete	11.	Add	ed to Fees	HANGES TO OFFI	CERS AND		S IN 11
After Ma	ay 1, 2005 Fee will be \$550 OFFICERS AN D CHAPMAN, JOHN D	Trust Fund Control D DIRECTORS Delete	11.	Add	ed to Fees	HANGES TO OFFI	CERS AND		
10.	ay 1, 2005 Fee will be \$550 OFFICERS AN	D DIRECTORS Delete	11. TITLE NAME STREE	Add	ed to Fees	HANGES TO OFFI	CERS AND		
After Ma	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete	11. TITLE NAME STREE	Add	ed to Fees	HANGES TO OFFI	CERS AND		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P	Trust Fund Control D DIRECTORS	11. TITLE NAME CITY- TITLE NAME	Add	ed to Fees	HANGES TO OFFI	CERS AND	Change :	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS	11. TITLE NAME STREE CITY- TITLE NAME STREE	Add	ed to Fees	HANGES TO OFFI	CERS AND	Change :	Addition
After M: 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P	Trust Fund Control D DIRECTORS Delete	11. TITLE NAME STREE CITY- TITLE NAME STREE CITY-	Add T ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	☐ Change :.	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS	11. TITLE NAME STREE CITY- TITLE NAME STREE	Add T ADDRESS ET ADDRESS ET ADDRESS ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	Change :	Addition
After M: 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete	TILE NAME CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	Add T ADDRESS ET ADDRESS ET ADDRESS ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	☐ Change :.	Addition
After M: 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete	TILE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	Add T ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	☐ Change :.	Addition
After M. 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete	TIDUTION 11. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	Add T ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	☐ Change :.	Addition
After M: 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete Delete	TIDUTION. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	Add TADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	☐ Change	Addition Addition
After M. 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete Delete	TIDUTION 11. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	Add T ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	☐ Change	Addition Addition
After M. 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete Delete	TIDUTION 11. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	Add TADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	☐ Change	Addition Addition
After M. 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete Delete Delete	TIDUTION 11. TITLE NAME STREE CITY-	Add TADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	Change Change Change	Addition Addition Addition
After M. 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete Delete Delete	TIDUTION TITLE NAME STREE CITY- TITLE NAME STREE STREE STREE NAME STREE STREE	Add TADORESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	IANGES TO OFFI	CERS AND	Change Change Change	Addition Addition Addition
After M. 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete Delete Delete Delete	TIDUTION 11. TITLE NAME STREE CITY- TITLE CITY- TITLE CITY- TITLE CITY- TITLE CITY- TITLE CITY- TITLE CITY-	Add TADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	Change Change Change	Addition Addition Addition
After M. 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete Delete Delete	TIDUTION TITLE NAME STREE CITY- TITLE NAME STREE STREE STREE NAME STREE STREE	Add TADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	Change Change Change	Addition Addition Addition
After M. 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete Delete Delete Delete	TITLE NAME STREE CITY-	Add TADDRESS ST-ZIP ET ADDRESS ST-ZIP	ed to Fees	HANGES TO OFFI	CERS AND	Change Change Change	Addition Addition Addition
After M. 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN D CHAPMAN, JOHN D 8431 IMMOKOLEE RD FT PIERCE, FL D CHAPMAN, SALLY P 8431 IMMOKOLEE RD	Trust Fund Control D DIRECTORS Delete Delete Delete Delete	TITLE NAME STREE CITY-	ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	ADDITIONS/CH			Change Change Change Change	Addition Addition Addition Addition

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: JOHN D. CHAP WAN 2-2-05 772 460-159