2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V35755

FILED
Apr 19, 2005
Secretary of State

Entity Name: GLOBAL CHARTER SERVICES, INC.

Current Principal Place of Business:

12 S.E. 1ST AVENUE
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

12 S.E. 1ST AVENUE
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 65-0331843 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVITT, DREW M
855 S. FEDERAL HWY
SUITE 212
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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: ______________________________

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	VAN ARNEM, KENNETH	
Address:	3314 LOWSON BLVD.	
City-St-Zip:	DELRAY BEACH, FL 33445	
Title:	ST	( ) Delete
Name:	ALLEN, BETTY E	
Address:	12 S.E. 1ST AVENUE	
City-St-Zip:	DELRAY BEACH, FL 33444	
Title:	D	( ) Delete
Name:	VAN ARNEM, H.L. IV	
Address:	155 SPRING STREET, 3RD FL	
City-St-Zip:	NEW YORK, NY 10012	
Title:	D	( ) Delete
Name:	VAN ARNEM, KENNETH M	
Address:	3314 LOWSON BLVD.	
City-St-Zip:	DELRAY BEACH, FL 33445	
Title:	D	( ) Delete
Name:	ALLEN, BETTY B	
Address:	12 S.E. 1ST AVENUE	
City-St-Zip:	DELRAY BEACH, FL 33444	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BETTY E. ALLEN ST 04/19/2005

Electronic Signature of Signing Officer or Director Date