


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2004 08:00 AM
Secretary of State

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| DOCUMENT # F74210 1. Entity Name CHATEAU VILLAGE PLAZA, INC. |  |
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| Principal Place of Business 600 ELMWOOD PK BLVD HARAHAN, LA 70123 US | Mailing Address 600 ELMWOOD PK BLVD HARAHAN, LA 70123 US |
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DO NOT WRITE IN THIS SPACE



02202004 No Chg-P CR2E034 (10/03)

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|---|--------------------------------|
| 4. FEI Number 74-2227952 | 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

KEENEY, MICHAEL D
900 GULFSHORE DRIVE, #1023
DESTIN, FL 32541

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | 000000070820 12/01/04-90050-025 150.00 |
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10. OFFICERS AND DIRECTORS

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|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD KEENEY, MICHAEL D 5521 REBECCA BLVD KENNER, LA |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S KEENEY, CECIL M. 900 GULFSHORE DRIVE, #1023 DESTIN, FL 32541 |
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *C. M. Keeny* 2/26/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #