

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matheny  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F94000006413 (8)**

1. Corporation Name  
**CHASE VENTURES, INC.**



Principal Place of Business: **% CHASE ENTERPRISES-ATTN: JOSEPH KORZENIK ONE COMMERCIAL PLAZA HARTFORD CT 06103**  
Mailing Address: **% CHASE ENTERPRISES-ATTN: JOSEPH KORZENIK ONE COMMERCIAL PLAZA HARTFORD CT 06103**

3. Date incorporated or Qualified: **12/13/1994**      3a. Date of Last Report: **04/03/1995**

4. FCI Number: **52-1818189**      Applied For:  Not Applicable:

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

6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

8. This corporation is eligible for intangible tax under s. 190.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent  
**ST. LOUIS, ROLAND R JR  
FRIEDMAN, RODRIGUEZ & FERRARO, P.A.  
201 S. BISCAYNE BLVD, 2300 MIAMI CENTER  
MIAMI FL 33131-4329**

10. Name and Address of New Registered Agent  
81. Name: \_\_\_\_\_  
82. Street Address P.O. Box Number (Not Acceptable): \_\_\_\_\_  
83. \_\_\_\_\_  
84. City: \_\_\_\_\_      85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.011 and 607.012, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change is a voluntary one, the corporation being not dissolved. Thereby, accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.011 and 607.012, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

13. TITLE	14. CHANGE
NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY, ST, ZIP	
13. TITLE	14. CHANGE
NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY, ST, ZIP	
13. TITLE	14. CHANGE
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STREET ADDRESS	
CITY, ST, ZIP	
13. TITLE	14. CHANGE
NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY, ST, ZIP	

14. I do hereby certify that the information furnished with this filing is true and correct to the best of my knowledge and belief. I am an officer or director of the corporation or the change of business is required to be filed by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 14 of this filing as required by law.

SIGNATURE: *Cheryl Chase Freedman*      Cheryl Chase Freedman, President      3/20/96      (860) 549-1674

CR2E034 (12/95)