

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **L89540** (3)

1. Corporation Name
CHASE & COMPANY

FILED
95 FEB -7 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**816 BRIGHTVIEW DR.
LAKE MARY FL 32746
US**

Mailing Address
**816 BRIGHTVIEW DR.
LAKE MARY FL 32746
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/27/1990** 3a. Date of Last Report **07/08/1994**

4. FEI Number **59-3018780** 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 has liability for intangible tax under §. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21. **2850 Cloverbrook Place** 2a. Mailing Address **2850 Cloverbrook Place**

Suite, Apt. #, etc. **2850C** Suite, Apt. #, etc.

22. **Lake Mary, Florida** 27. **Lake Mary, Florida**

City & State Zip Country **32746 USA** 29. **32746** 30. **USA**

9. Name and Address of Current Registered Agent

**AKINS, DAVID J.
SUNBANK CENTER
200 S ORANGE AVE., STE. 3000
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0509, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	CHASE, SYDNEY O., III
STREET ADDRESS	816 BRIGHTVIEW DR.
CITY - ST - ZIP	LAKE MARY FL
TITLE	DVP
NAME	CHASE, ROLAND S.
STREET ADDRESS	816 BRIGHTVIEW DR.
CITY - ST - ZIP	LAKE MARY FL
TITLE	DVP
NAME	CHASE, TORSTEN F
STREET ADDRESS	816 BRIGHTVIEW DR.
CITY - ST - ZIP	LAKE MARY FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I do not qualify for the exemption stated in Section 110.07(4)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with my address.

SIGNATURE: Sydney O. Chase III / Sydney O. Chase III 04 Feb. 95 407-322-1161