FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address
12202 NORTH 56TH STREET

TAMPA FL 33617

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 15, 1999 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

02-15-1999 90019 028 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000064077

Corporation Name

Principal Place of Business

12202 NORTH 56TH STREET

SIGNATURI

TAMPA FL 33617

CHATENBURY PLACE, INC.

					09/09/1993		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
14		26			59-3211450		Not Applicable
• • • • • • • • • • • • • • • • • • • •		Suite, Apt. #, etc.	ite, Apt. #, etc.		5. Certifcate of Status Desired	• .	Additional Required
2	<u> </u>	27	·				
City & State City & State					6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
7: Cour			Country		8. This corporation owes the current year	ar Intangible	
Zip 			-n '		Personal Property Tax.		□No
4 25 29 30 9. Name and Address of Current Registered Agent			<u> </u>		10. Name and Address of New Registe	red Agent	
	9. Name and Address of Current	Registered Agent	81	Name			
FABER, PHYLLIS							
12202 NORTH 56TH STREET				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
TAMPA FL 33617							
			84	City		85 Zi	p Code
			1			FL	
11. Pursuant i	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above	e-named corpo	oration submits this statement for the purpose	e of changing	its registered
	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida Such channe was aut	nonzea ov	THE COIDOLAGO	on's board of directors. I hereby accept the a	ppontinent as	registered
agent. I ar	m tamıllar with, and accept the obligation	ons or, deciron our cood, more	20.00000	•			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: 5	tegistered Age	nt signature required	d when reinstating) DAT	E	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER	S AND DIREC	TORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		11.0	☐ Chang	ge 🔲 Addition
	SAUNDERS, BETH	_	1.2 NAME				
NAME				T ADDRESS			
STREET ADDRESS	6013-C LAKE TREE LANE					int.	
CITY-ST-ZIP	TOTAL TELEVISION OF THE PROPERTY OF THE PROPER		1.4 CITY-S	1-ZIP		☐ Chang	e
TITLE	T	☐ DETE IE	2.1 TITLE			<u> </u>	
NAME	FABER, PHYLLIS		2.2 NAME				
STREET ADDRESS	10908 NORTH 52 STREET		2.3 STREE	TADORESS	, ,		•
CITY-ST-ZIP	TAMPA FL		2. 4 CITY-	ST-ZIP		☐ Chang	ge Addition
TITLE .		☐ DELETE	3.1 TITLE				je 🗀 Addition
NAME	en e		3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS	ar gyran i jako i grong	\$80E \$14.55 \$	17 26 40 64
CITY-ST-ZIP	,		3.4. CITY-	ST-ZIP		<u> 44 4 1900</u>	4.1 通過過過
TITLE		☐ DELETE	4.1 TITLE			で de de Chang	ge 🧢 🔲 Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			
			4.4 CITY-5	1			
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE		•	. Chan	ge Addition
			5.2 NAME				
NAME			5.3 STREE	T ADDRESS			
STREET ADDRESS			5.4 CITY-5		7. · ·		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE			Chan	ge 🔲 Addition
TITLE			6.2 NAME				
NAME	# 1 m		I	T ADDRESS			
STREET ADDRESS	· ·				•		•
CITY-ST-ZIP			6.4 CITY-1		0 - 4:- 440 07/2)/i) Florido Diolego 15 - 4b	or cortifu that t	ne information
indicated	certify that the information supplied with on this annual report or supplemental director of the corporation or the receiv or Block 13 if changed, or on an attact	annual report is true and accur er or trustee empowered to ex	ace and the ecute this	report as requi	Section 119.07(3)(i), Florida Statutes. I furth e shall have the same legal effect as if made ired by Chapter 607, Florida Statutes; and t	under oath; that my name a	nat I am an appears in