

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

**FILED**  
**Mar 16 1998 8:00am**  
**Secretary of State**



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

PROFIT CORPORATION ANNUAL REPORT 1998

**DOCUMENT # P97000035445 (0)**  
 1. Corporation Name  
**CHARTER DATABANK INTERNATIONAL, INC.**



Principal Place of Business: **361 NW AURORA PORT ST. LUCIE FL 34983**  
 Mailing Address: **361 NW AURORA PORT ST. LUCIE FL 34983**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>61 Woodland Drive</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>61 Woodland Drive</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>04/18/1997</b>	
22 City & State 23 <b>Tequesta, FL</b>		27 City & State 28 <b>Tequesta, FL</b>		4. FEI Number <b>65-0746797</b> Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
24 Zip <b>33469</b>		29 Zip <b>33469</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
25 Country <b>USA</b>		30 Country <b>USA</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
9. Name and Address of Current Registered Agent <b>BRANDON, CHARLES F 1881 NE 28TH STREET, SUITE 203 FORT LAUDERDALE FL 33305</b>				10. Name and Address of New Registered Agent	

81 Name <b>Gordon Stonehouse</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>61 Woodland Drive</b>	
83	
84 City <b>Tequesta</b>	85 Zip Code <b>FL 33469</b>

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 607.0505, Florida Statutes.  
 SIGNATURE: *Gordon Stonehouse* **PRESIDENT** 3/11/98  
Signature, hand or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PD STONEHOUSE, GORDON</b>	1.2 NAME	
STREET ADDRESS	<b>361 NW AURORA</b>	1.3 STREET ADDRESS	<b>61 Woodland Drive</b>
CITY-ST-ZIP	<b>PORT ST. LUCIE FL 34983</b>	1.4 CITY-ST-ZIP	<b>Tequesta, FL 33469</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>STD CHAMBERLAIN, PAUL</b>	2.2 NAME	
STREET ADDRESS	<b>361 NW AURORA</b>	2.3 STREET ADDRESS	<b>61 Woodland Drive</b>
CITY-ST-ZIP	<b>PORT ST. LUCIE FL 34983</b>	2.4 CITY-ST-ZIP	<b>Tequesta, FL 33469</b>
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Gordon Stonehouse* **Gordon Stonehouse, Pres. 3/11/98 (561) 746-9221**

CR2E034 (10/97)