# 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 above, or on an attachment with all other like empowered.

#### SIGNATURE: CRAIG A. CHASE

Electronic Signature of Signing Officer/Director Detail

PD

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under

#### 03/04/2014

# Certificate of Status Desired: No

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.

## SIGNATURE:

Electronic Signature of Registered Agent

## Officer/Director Detail :

Title	PD	Title	D
Name	CHASE, CRAIG	Name	CHASE, JANICE L
Address	PO BOX 18402	Address	PO BOX 18402
City-State-Zip:	TAMPA FL 33679	City-State-Zip:	TAMPA FL 33679

## DOCUMENT# M26092

Entity Name: BERT CHASE REALTY, INC.

#### **Current Principal Place of Business:**

% CRAIG CHASE 4615 N. A STREET TAMPA, FL 33609

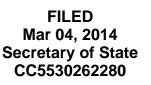
#### **Current Mailing Address:**

% CRAIG CHASE P. O. BOX 18402 TAMPA, FL 33679

#### FEI Number: 59-2992157

## Name and Address of Current Registered Agent:

CHASE, CRAIG 4615 N. A STREET TAMPA, FL 33609 US



Date