

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 002759 (9)

1. Corporation Name
CHITTY & CO.

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 13 AM 10:14

Principal Place of Business
**2225 DENNIS ST
JACKSONVILLE FL 32204**

Mailing Address
**2225 DENNIS ST
JACKSONVILLE FL 32204**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 07/30/1904	3a. Date of Last Report 01/26/1994
4. FEI Number 59-0192760	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 S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State 22	City & State 27
Zip 23	Country 28
Country 24	Country 29
Country 25	Country 30

9. Name and Address of Current Registered Agent

**THOMPSON, DENNIS B.
2512 CROOKED CREEK POINT
MIDDLEBURG FL 32068**

10. Name and Address of New Registered Agent

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

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 officer 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

Dennis B. Thompson

1-9-95

(Signature of current or former registered agent and their appointment)

(Signature of registered agent and their appointment)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1. TITLE	☐ Change ☐ Addition
NAME	THOMPSON, H. MARSHALL	2. NAME	
STREET ADDRESS	2728 CLAIRBORO ROAD	3. STREET ADDRESS	
CITY, ST, ZIP	JACKSONVILLE FL	4. CITY, ST, ZIP	
TITLE	D	5. TITLE	☐ Change ☐ Addition
NAME	THOMPSON, MARGARET J	6. NAME	
STREET ADDRESS	4177 CHURCHWELL ROAD	7. STREET ADDRESS	
CITY, ST, ZIP	JACKSONVILLE FL	8. CITY, ST, ZIP	
TITLE	D	9. TITLE	☐ Change ☐ Addition
NAME	THOMPSON, DENNIS B.	10. NAME	
STREET ADDRESS	2512 CROOKED CREEK POINT	11. STREET ADDRESS	
CITY, ST, ZIP	MIDDLEBURG FL	12. CITY, ST, ZIP	
TITLE		13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY, ST, ZIP		16. CITY, ST, ZIP	
TITLE		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY, ST, ZIP		20. CITY, ST, ZIP	
TITLE		21. TITLE	☐ Change ☐ Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY, ST, ZIP		24. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(6)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 registered agent 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 as an attachment with an address.

SIGNATURE

(Signature and typed name of signing officer or director)

Dennis B. Thompson

1-9-95

904-354-3776

(Date)

(Telephone Number)