

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 146800 (8)
1. Corporation Name
CHATHAM REALTY CORPORATION

Principal Place of Business
3820 LAVISTA CIRCLE #108
JACKSONVILLE FL 32217
4417 BEACH BLVD # 310
JACKSONVILLE, FL 32207

Mailing Address
3820 LAVISTA CIRCLE #108
JACKSONVILLE FL 32217
4417 BEACH BLVD # 310
JAX FLA 32207

2. Principal Place of Business
21 4417 BEACH BLVD
Suite, Apt. #, etc.
22 # 310
City & State
23 JACKSONVILLE FLA
Zip
24 32207
Country
25 DUVAL

2a. Mailing Address
26 4417 BEACH BLVD
Suite, Apt. #, etc.
27 # 310
City & State
28 JACKSONVILLE FLA
Zip
29 32207
Country
30 DUVAL

9. Name and Address of Current Registered Agent
PRESSER, EDWIN
802 SCOTT BLDG
4011 BOH BLVD
JACKSONVILLE FL 32207-32207

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
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 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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
1. COHEN, JOSEPH
3820 LAVISTA CIRCLE #108
JACKSONVILLE FL
2. COHEN, STANLEY W
8805 CHRYSLER DR 2686 SPREADING OAKS LN
JACKSONVILLE FL 32223
3. PRESSER, ANNE C
2467 CASTALLON DR. N.
JACKSONVILLE FL
4. COHEN, JOSEPH
3820 LAVISTA CIRCLE #108
JACKSONVILLE FL
5.
6.
7.
8.
9.
10.
11.
12.
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 _____ (904) 268-4588

FILED
Aug 28 1997 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/27/1946
3a. Date of Last Report
07/11/1996

4. FEI Number
59-0550679
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 owes or has paid the current year Intangible Personal Property Tax due June 30.
Yes No

CR2E034 (4/97)