

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 477507 (8)

1. Corporation Name

CHEZ PIERRE, INC.



Principal Place of Business

2142 GULF GATE DRIVE
SARASOTA FL 34231

Mailing Address

2142 GULF GATE DRIVE
SARASOTA FL 34231

3. Date Incorporated or Qualified
06/06/1975

3a. Date of Last Report
03/02/1995

4. FEI Number
59-1596745

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

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEWIS, KURT F.
6624 GATEWAY AVENUE
SARASOTA FL 34231

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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

Signature of the person who is authorized to execute this statement

Signature of the person who is authorized to execute this statement

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	D	NAME	PREFONTAINE, PIERRE	DELETE
2. NAME		STREET ADDRESS	2142 GULF GATE DRIVE	
3. CITY, ST, ZIP			SARASOTA FL	
4. TITLE	S	NAME	PREFONTAINE, RUTH A.	DELETE
5. NAME		STREET ADDRESS	2142 GULF GATE DRIVE	
6. CITY, ST, ZIP			SARASOTA FL	
7. TITLE	D	NAME	PREFONTAINE, RUTH A.	DELETE
8. NAME		STREET ADDRESS	2142 GULF GATE DRIVE	
9. CITY, ST, ZIP			SARASOTA FL	
10. TITLE		NAME		DELETE
11. NAME		STREET ADDRESS		
12. CITY, ST, ZIP				
13. TITLE		NAME		DELETE
14. NAME		STREET ADDRESS		
15. CITY, ST, ZIP				
16. TITLE		NAME		DELETE
17. NAME		STREET ADDRESS		
18. CITY, ST, ZIP				

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	Change	Addition
2. NAME		
3. STREET ADDRESS		
4. CITY, ST, ZIP		
5. TITLE	Change	Addition
6. NAME		
7. STREET ADDRESS		
8. CITY, ST, ZIP		
9. TITLE	Change	Addition
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE	Change	Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE	Change	Addition
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 the good, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/96

CR2E034 (12/95)