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FILED
Mar 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 604249 (3)

1. Corporation Name

CHAMBERS, SALZMAN & BANNON, P.A.

CHAMBERS, BANNON, CHAMBERS & CHAMBERS, P.A. *12-1-97*

Principal Place of Business

Mailing Address

520 4TH ST N POB 1191
ST PETERSBURG FL 33701

520 4TH ST N POB 1191
ST PETERSBURG FL 33701

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/27/1973

4. FEI Number

59-1454535

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHAMBERS, JOSEPH H
520 4TH ST N
ST PETERSBURG FL 33701

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME CHAMBERS, JOSEPH H
STREET ADDRESS 520 4TH ST N
CITY-ST-ZIP ST PETERSBURG, FL 00000 ☐ DELETE

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP 33701

TITLE SD
NAME MASTRY, R. DONALD
STREET ADDRESS 360 CENTRAL AVE.
CITY-ST-ZIP ST. PETERSBURG FL ☐ DELETE

2.1 TITLE S (NOT S/D) ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D
NAME SALZMAN, BARRY M
STREET ADDRESS 520 4TH ST N
CITY-ST-ZIP ST PETERSBURG FL ☒ DELETE

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D
NAME BANNON, RICK G
STREET ADDRESS 520 4TH ST N
CITY-ST-ZIP ST PETERSBURG FL ☐ DELETE

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP 33701

TITLE D
NAME CHAMBERS, JOSEPH W
STREET ADDRESS 520 4TH ST N
CITY-ST-ZIP ST PETERSBURG FL ☐ DELETE

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP 33701

TITLE D
NAME CHAMBERS, JEFFREY K
STREET ADDRESS 520 4TH ST N
CITY-ST-ZIP ST PETERSBURG FL ☐ DELETE

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP 33701

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 of this report, or on an attachment with my address.

JOSEPH H. CHAMBERS 3/23/98 813-896-2167

CR2E034 (10/97)