**FILED** 

Feb 17, 1999 8:00am

**Secretary of State** 

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 639089  1. Corporation Name						02-17-1999 90058 003 ***150.0	00	
ROGERS PLANTATION CHEVRON, INC.								
Principal D	loss of Duvings							
Principal Place of Business Mailing Address						, coace direction color philat intib (A) (4)	AKAN BIBII BIBI	1 61611 91911 1 <b>9</b> 61
		4215 PETERS RD PLANTATION FL 33317				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	SPACE	
			•			10/01/1979		
$\overline{}$	Place of Business	2a. Mailing Address				4. FEI Number	A	pplied For
Suite, Ap	at # ata	26	·			<u>59-1964242</u>	<b>⊢-</b> -	lot Applicable
22		Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75	Additional lequired
City & St	ate	City & State	• .			6. Election Campaign Financing		May Be
Zip	Country	Zip	Count	rv	<del></del>	Trust Fund Contribution		to Fees
24	25	29	30	.,	1	<ol><li>This corporation owes the current year Int Personal Property Tax.</li></ol>	angible □Yes	п.,
<u> </u>	<ol><li>Name and Address of Curre</li></ol>	лt Registered Agent			10	0. Name and Address of New Registered		□No
. BU	IGEDS D EDWARD		8	1 Nam	10		-90111	
ROGERS, D EDWARD 4215 PETERS RD				2 Stree	et Address (	(P.O. Box Number is Not Acceptable)	<del></del>	
PLANTATION FL 33317				-  """	or Address (	(F.O. Box Number is Not Acceptable)		
· GARIOHOR LE 3001/			8.	3			J. J. 381	
				4 City	<del></del>		85 Zip'	Code
11. Pursuar	t to the provisions of Sections 607.05	02 and 607,1508, Florida Statut	es the abov	/e-name	ed corporatio	on submits this statement for the purpose of		
office or agent. I	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was a	uthorized by	the cor	rporation's b	on submits this statement for the purpose of poard of directors. I hereby accept the appoin	changing its itment as re	registered gistered
SIGNATURE	•	24070 01, 0004011 007,0000, 110	nua Statute	5.				_
	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE	Registered Age	ent signature	e required when	reinstating) . DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12:
TITLE	C POOSED D FOULED	☐ DELETE	1.1 TITLE				☐ Change	Addition
NAME	ROGERS, D EDWARD		1.2 NAME			•	-	_
STREET ADDRESS			1.3 STREE	TADDRESS	s			
CITY-ST-ZIP TITLE	PLANTATION FL		1.4 CITY-5	ST-ZIP	,	<u>.                                     </u>	. 3	
NAME	[ •	☐ DELETE	2.1 TITLE				☐ Change	☐ Addition
	FULTON, EARL L.		2.2 NAME				!	
STREET ADDRESS CITY-ST-ZIP	4215 PETERS RD PLANTATION FL		2.3 STREE	T ADDRESS	s			
TITLE	-S		2. 4 CITY-5	ST-ZIP			•	
NAME	ROGERS, DOROTHY	DELETE	3.1 TITLE		ļ		☐ Change	☐ Addition
STREET ADDRESS			3.2 NAME					,
CITY-ST-ZIP	PLANTATION FL		3.3 STREE		3	the state of the s	n (et par e	TA 7 85, 190
TITLE	T D STATION   E	☐ DELETE	3.4. CITY-S 4.1 TITLE	T-ZIP			19 8	
NAME			1			人名英格兰 医克里氏 医克里氏 医克里氏	Change.	`₹.
STREET ADDRESS			4.2 NAME	4000000				]
CITY-ST-ZIP			4.3 STREET		<u>'</u>			
TITLE			4.4 CITY-S		<u> </u>	<u> </u>		1
NAME .		☐ DELETE	51 TITLE	-ZIP				
STREET ADDRESS		☐ DELETE	5.1 TITLE 5.2 NAME	1-ZIP			Change	Addition
		☐ DELETE					Change	Addition
CITY-ST-ZIP	- 13 - 12	☐ DELETE	5.2 NAME 5.3 STREET	ADDRESS			Change	Addition
CITY-ST-ZIP TITLE	Prof. St. Commercial	☐ DELETE	, 5.2 NAME	ADDRESS				
			5.2 NAME 5.3 STREET 5.4 CITY-ST	ADDRESS			☐ Change ☐ Change	Addition

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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an officers, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP