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Secretary of State



PROFIT CORPORATION ANNUAL REPORT 1997

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

DOCUMENT # 680673 (1)
1. Corporation Name
CHIPLEY AREA DEVELOPMENT, INC.



Principal Place of Business: 685 7TH STREET, BOX 457, CHIPLEY FL 32428 US
Mailing Address: BOX 457, CHIPLEY FL 32428-0457 US

3. Date Incorporated or Qualified: 08/01/1980
3a. Date of Last Report: 06/13/1996
4. FEI Number: 59-2071910
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes

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

9. Name and Address of Current Registered Agent
REGISTER, STEPHEN B. JR.
1552 BRICKYARD ROAD
CHIPLEY FL 32428

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
B5 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: Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	REGISTER, STEPHEN B. JR.	
STREET ADDRESS	1552 BRICKYARD ROAD	
CITY- ST- ZIP	CHIPLEY, FL 00000	
TITLE	D	DELETE
NAME	WORLEY, RICHARD	
STREET ADDRESS	FALLING WATERS ROAD	
CITY- ST- ZIP	CHIPLEY FL	
TITLE	D	DELETE
NAME	ELLIS, O. L JR	
STREET ADDRESS	1297 FAIRWAY DR	
CITY- ST- ZIP	CHIPLEY FL	
TITLE	STD	DELETE
NAME	DOUGHTERY, JOHN	
STREET ADDRESS	SIXTH ST	
CITY- ST- ZIP	CHIPLEY, FL 00000	
TITLE	D	DELETE
NAME	AUKEMA, ART	
STREET ADDRESS	3061 WOODREST RD	
CITY- ST- ZIP	CHIPLEY, FL 00000	
TITLE	DP	DELETE
NAME	TOWNSEND, LAMAR	
STREET ADDRESS	BRICKYARD RD	
CITY- ST- ZIP	CHIPLEY, FL 00000	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY- ST- ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY- ST- ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY- ST- ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY- ST- ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY- ST- ZIP		
6.1 TITLE	Change	Addition
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: John F. Dougherty
DATE: 2-26-97
DAYTIME PHONE: 904-638-4157

CR2E034 (9/96)