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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F94000006413 (8)

CHASE VENTURES, INC.

FILED Apr 14 1998 8:00am Secretary of State



Principal Pla	ice of Business	Mailing Address				- 1 JEGHADO MINO NOMIN BURNI GOMIN OBANI DOMIN DOMINE	Aftit Dibat (1850 1111 1661			
ONE COMM	ENTERPRISES-ATTN: JOSEPH KORZENIK IERCIAL PLAZA	% Chase enterprises-attn: Joseph Korzenik One Commercial Plaza			PH KORZENIK					
HARTFORD CT 06103		HARTFORD CT 06103				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified 12/13/1994				
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number	Applied For			
1		26				52-1818189	Not Applicable			
Suite, Apt	t W, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 14	Country 25	Zip 29	30	untry		This corporation owes or has paid the curre Personal Property Tax due June 30.	nt year Intangible Yes			
OT LOUIS, ROUNDED IT OR						10. Name and Address of New Registered Agent				
				81	Name					
				82	Street Addre	Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33131-4325			83	83						
				84	City	FL	85 Zip Code			
11. Pursuan	to the provisions of Sections 607 0502	and 607.1508, Flor	ida Statutes, the a	bove	-named corpo	pration submits this statement for the purpose of co	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	Cignal so by od or	Cristian					- a ia	
	 Signature, typed or 	proded	teme, o	ang.	destart.	ACT: 1	481101 1111	1

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT				
TITLE	D	DELETE	1.1 TITLE		☐ Change	☐ Addition		
NAME	CHASE, DAVID T		1.2 NAME					
STREET ADDRESS	ONE COMMERCIAL PLAZA		1.3 STREET ADDRESS					
CITY-ST-ZIP	HARTFORD CT 06103		1.4 CITY - ST - ZIP					
TITLE	PTD	☐ DELETE	2.1 TITLE		Change	Addition		
NAME	CHASE, CHERYL A		2.2 NAME					
STREET ADDRESS	ONE COMMERCIAL PLAZA		2 3 STREET ADDRESS					
CITY-ST-ZIP	HARTFORD CT		2 4 CITY-ST-ZIP	gar. Disp.				
TITLE	VASO	☐ DELETE	31 TITLE		☐ Change	Addition		
NAME	CHASE, ARNOLD L		3.2 NAME					
STREET ADDRESS	ONE COMMERCIAL PLAZA		3 3 STREET ADDRESS					
CITY-ST-ZIP	HARTFORD CT 06103		3 4. CITY-ST-ZIP					
TITLE	V\$	DELETE	4.1 TOTLE		☐ Change	Addition		
NAME	SMALLRIDGE, LOWELL P		4. 2 NAME					
STREET ADDRESS	-19152-6W-816T-PLACE-RD-		4.3 STREET ADDRESS	8625 S/W 200th Sircle				
CITY-ST-ZIP	DUNNELLON FL 34432		4.4 CITY-ST-ZIP	•				
TITLE	V	DELETE	5.1 TITLE		Change	Addition		
NAME	COLLINS, JAMES T		5.2 NAME					
STREET ADDRESS	-19152-SW-81ST-PLACE RD -		5.3 STREET ADDRESS	8625 S/W 200th Circle				
CITY-ST-ZIP	DUNNELLON FL 34432		5.4 CITY-ST-ZIP					
TITLE		DELETE	6.1 TITLE		Change	Addition		
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					

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 if changed, or on an attachment with an address.

SIGNATURE:

Chervl A. Chase

3/30/98 860/549-1674