

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

FILED  
May 07, 1999 8:00 am  
Secretary of State

05-07-1999 90092 037 \*\*\*150.00

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DOCUMENT # F97953

1. Corporation Name  
CHRISHAWN ASSOCIATES, INC.

Principal Place of Business  
MANASOTA INDUSTRIAL PARK  
4693 19TH STREET COURT EAST  
BRADENTON FL 34203

Mailing Address  
MANASOTA INDUSTRIAL PARK  
4693 19TH STREET COURT EAST  
BRADENTON FL 34203



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

09/02/1982

4. FEI Number

57-0694360

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 the current year Intangible

Personal Property Tax.

X Yes No

9. Name and Address of Current Registered Agent

CASO, GEORGE  
307 69TH STREET, NW  
BRADENTON FL 34209

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS

TITLE DT  
NAME ANGELI, LINDA  
STREET ADDRESS 1121 PALMA SOLA BLVD.-  
CITY-ST-ZIP BRADENTON, FL 00000-

TITLE DP  
NAME ANGELI, ALEXANDER  
STREET ADDRESS 1121 PALMA SOLA BLVD.  
CITY-ST-ZIP BRADENTON, FL 00000-

TITLE DS  
NAME CASO, DONNA R  
STREET ADDRESS 307 69TH ST, NW  
CITY-ST-ZIP BRADENTON, FL 00000 34209

TITLE DC  
NAME CASO, GEORGE W  
STREET ADDRESS 307 69TH ST, NW  
CITY-ST-ZIP BRADENTON, FL 00000 34209

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE XX Change Addition  
1.2 NAME  
1.3 STREET ADDRESS 5006 50th Ave. W.  
1.4 CITY-ST-ZIP Bradenton, FL 34210

2.1 TITLE XX Change Addition  
2.2 NAME  
2.3 STREET ADDRESS 5006 50th Ave. W.  
2.4 CITY-ST-ZIP Bradenton, FL 34210

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 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 as an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alexander Angeli  
President

4/30/99

Date

941/745-2254

Daytime Phone #

CR2E034 (11/98)