PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90224 043 \*\*\*150.00

## DOCUMENT # G13702

CHAIN L	odging Supply, in	C.								
Principal Place of Business Mailing Address  5780 QUINTETTE ROAD  PACE FL 32571  US  Mailing Address  5780 QUINTETTE ROAD  PACE FL 32571  US					·	DO NOT W	RITE IN THIS S			7
					-	ate Incorporated or Qualife 2/16/1982	d			
2. Prin ≾ipal Pl	lace of Business	2a. Mailing Address			4. FE	I Number			pplied For	1
21		26				9-2241417		<del></del>	ot Applicable Additional	1
Suite, Apt.	#, etc.	Suite, Apt. #, etc	i.		5. Ce	ertificate of Status Desired		Fee R		
City & State	te	City & State				ection Campaign Financing	<b>3</b> 🗆		May Be	1
23		28	Count			ust Func Contribution			to Fees	┨
Zip 24	Country 25	Zip 29	30	ıy		nis corporation owes the cuersonal Property Tax.		Yes Yes	□No	1
241		f Current Registered Agent	1301			ame and Address of New	Registered A	pent		]
			8	1 Name	TN DE					
	erts, gerald M South Navy Blyd		8	2 Street	TN , PH Address (P.O	. Box Number is Not Accer	otable)	_		1
	SACOLA, FL		i	5780	O_QUIN'	TETTE ROAD				┨
3250			ľ	3			<u>-</u>			ì
				4 City PACI	P		FL	32	Code 2571	1
11. Pursuant	to the provisions of Sections	607.0502 and 607.1508, Florida be State of Florida. Such change be obligations of, Section 607.050	Statutes, the abo	ve-named	comporation su	ubmits this statement for th	ne purpose of ch	anging its	s registered	1
office or n agent, I a	registered agent/or both, in/th im familiar with and accept the	pé State of Florida, Such change ne obligations of, Section 607.050	was authorized b 5, Florida Statute	y the corpo ss.	oration s boar	d of directors. I hereby acc		/1/2	-Aisteren	1
SIGNATURE	(hZA/IIV /Y /	Satisfied by and title if applicable					3/29/	<u>99</u>		١
	Signature, typed or printed name of neg									۱ ـ
12			(NOTE Registered A	pent signature n			OFFICERS AND	DIRECT	ORS IN 12	í
12.	OFFIC	ERS AND DIRECTORS  DELE	13.			DITIONS/CHANGES TO C		DIRECTO		(11/08)
<b></b>	PD CRAIN, PHIL	ERS AND DIRECTORS	13.		PD AD					
TITLE	PD CRAIN, PHIL	ERS AND DIRECTORS	13. TE 1.1 TITLE 12 NAM		PD CRAIN 5780 (	DITIONS/CHANGES TO C , PHIL QUINTETTE RO	3			
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TITLE NAME STREET AXORESS CITY-ST-3P TITLE	PD CRAIN, PHIL 3300 COLONIAL OAKS PACE FL DS	ERS AND DIRECTORS	13. TE 1.1 TITLE 12 NAM 1.3 STRE 1.4 CITY TE 2.1 TITLE	E EET ADDRESS -ST-ZIP	PD CRAIN 5780 ( PACE, DS	OTTIONS/CHANGES TO C , PHIL QUINTETTE RO FL 32571	) PAD		Addition	025034 (11
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14. I haraby 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 ceth; that I am an officer or director of the corporation at 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, and made appears in the receiver of the corporation at a state of the corporation at the receiver of the r

SIGNATURE

3/10/8

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