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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # G81015

(1)

ST. CHARLES PLACE OF CLEARWATER, INC.

Principal Place of Business Mailing Address							#1011 1He)	
% RICHARD A. LEANDRI 1114 S MYRTLE AVE		% RICHARD A. LEA	Mailing Address % RICHARD A. LEANDRI 1114 S MYRTLE AVE CLEARWATER FL 34616-3900				•	
				_	3. Date Incorporated or Qualified 01/26/1984	3a. Date of Last F 04/15/1996	Date of Last Report 4/15/1996	
	lace of Business	2a. Mailing Address	s		4. FEI Number		oplied For	
Suite, Apt	the cate	Suite, Apt. #, et	~		59-2369323	¢0.75	ot Applicabl	
22	π, ζιι	27			5. Certificate of Status Desired	1 1	Additional equired	
City & Stat	le	City & State			6. Election Campaign Financing		May Be	
23		28			Trust Fund Contribution		to Fees	
Z _i p	Country	Zip	Coul	ntry	8. This corporation has liability for in		. 199.032,	
24	25 25 25 26 26 26 26 26 26 26 26 26 26 26 26 26	29	30		Florida Statutes 10. Name and Address of New Rec	Yes No		
I CA	NDRI, RICHARD A.	Igili Ugğiştelen Malit		81 Name	IU. Hame and Address of New Neg	Sereion Wann		
	4 S MYRTLE AVE					····		
	EARWATER FL 44616			82 Street Add	dress (P.O. Box Number is Not Acceptable	le)		
-				83				
				84 City		FL 85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida	Statutes, the at	ove-named cor	rporation submits this statement for the pr		ts registere	
office or r	registered agent, or both, in the St	late of Florida, Such change	was authorized	d by the corpora	rporation submits this statement for the plation's board of directors. I hereby accep	t the appointment as	registered	
	am tamiliar with land accept the ob	Dinations of Section 607.05	us. Fiorida stat					
	am familiar with, and accept the of	Digations of, Section 607.05	ius, Fiorida Stati					
SIGNATURE	Signature typed or printed name of registered	d agent and title if applicable.	(NOTE: Registered		uired when reinstating)	DATE		
SIGNATURE	Signature typed or printed name of registered	d agent and title if applicable. AND DIRECTORS	(NOTE: Registered	Agent signature requ		DATE ERS AND DIRECTOR		
SIGNATURE 12. THE	Signer re-typed to proted name of registered OFFICERS	d agent and title if applicable.	(NOTE: Registered	Agent signature requ	uired when reinstating)	DATE		
SIGNATURE 12. TILE NAME	Signed to protest name of registered OFFICERS P LEANDRI, RICHARD A	d agent and title if applicable. AND DIRECTORS	(NOTE: Registered 13. TE 1.1 YII 1.2 NA	Agent signature requ	uired when reinstating)	DATE ERS AND DIRECTOR		
SIGNATURE 12. HILE NAME STREET ADDRESS	P LEANDRI, RICHARD A 1798 LONGBOW LANE	d agent and title if applicable. AND DIRECTORS	(NOTE Registered 13, TE 1.1 YII 1.2 NA 1.3 ST	Agent signature required. LE ME REET ADDRESS	uired when reinstating)	DATE ERS AND DIRECTOR		
SIGNATURE 12. HILE NAME	Signed to protest name of registered OFFICERS P LEANDRI, RICHARD A	d agent and title if applicable. AND DIRECTORS	(NOTE Registered 13, TE 1.1 TII 12 NA 1.3 ST 1.4 CI	I Agent signature requ LE ME REET ADDRESS IY+ST-ZIP	uired when reinstating)	DATE ERS AND DIRECTOR	☐ Additio	
SIGNATURE 12. THE NAME STREET ADDRESS CITY SE-722	P LEANDRI, RICHARD A 1798 LONGBOW LANE	agont and thin if applicable. AND DIRECTORS	(NOTE Registered 13, TE 1.1 TII 1.2 NA 1.3 ST 1.4 CI	LE ME REET ADDRESS IY - ST - ZIP LE	uired when reinstating)	DATE ERS AND DIRECTO	Addition	
SIGNATURE 12. HILE NAME STREET ADDRESS CITY ST-732	Signetize typed or proted name of registered OFFICERS / P LEANDRI, RICHARD A 1798 LONGBOW LANE CLEARWAYER FL T	agont and thin if applicable. AND DIRECTORS	(NOTE Registered 13. TE 1.1 TII 12 NA 1.3 ST 1.4 CI TE 21 TII 22 NA	LE ME REET ADDRESS IY - ST - ZIP LE	uired when reinstating)	DATE ERS AND DIRECTO	Addition	
SIGNATURE 12. HILE NAME STREEL ADDRESS CITY ST-722 HILE NAME	P LEANDRI, RICHARD A 1798 LONGBOW LANE CLEARWATER FL T MACINA, ALFRED	agont and thin if applicable. AND DIRECTORS	(NOTE Registered 13. TE 1.1 TII 1.2 NA 1.3 ST 1.4 CI TE 2.1 TII 22 NA 23 ST	LE ME REET ADDRESS IY-ST-ZIP LE ME	uired when reinstating)	DATE ERS AND DIRECTO	☐ Additio	
SIGNATURE 12. HILE NAME STREEL ADDRESS CHY S.E-7.2* THLE NAME STREEL ADDRESS	OFFICERS A P LEANDRI, RICHARD A 1798 LONGBOW LANE CLEARWATER FL T MACINA, ALFRED 1830 OAKLAKE DRIVE CLEARWATER FL S	agont and thin if applicable. AND DIRECTORS	(NOTE Registered 13. TE 1.1 TII 12 NA 1.3 ST 1.4 CI TE 2.1 TII 22 NA 23 ST 2.4 CI	LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LT ME REET ADDRESS IY-ST-ZIP	uired when reinstating)	DATE ERS AND DIRECTO	☐ Additio	
SIGNATURE 12. HILE NAME STREEL ADDRESS CITY SE-722 HILE NAME STREEL ADDRESS CITY-SE-742	OFFICERS A P LEANDRI, RICHARD A 1798 LONGBOW LANE CLEARWAYER FL T MACINA, ALFRED 1830 OAKLAKE DRIVE CLEARWAYER FL S HOGAN, ELWOOD J	agent and the il applicable. AND DIRECTORS DELE DELE	(NOTE Registered 13. TE 1.1 TII 1.2 NA 1.3 ST 1.4 CI TE 2.1 TII 2.2 NA 2.3 ST 2.4 CI	LE ME REET ADDRESS LE ME ME ME REET ADDRESS LY - ST - ZIP LE ME REET ADDRESS LY - ST - ZIP LE	uired when reinstating)	DATE ERS AND DIRECTOR Change	Additio	
SIGNATURE 12. HILE NAME STREEL ADDRESS CHY SI-722 THLE NAME STREEL ADDRESS CHY-SI-746 THLE	OFFICERS J P LEANDRI, RICHARD A 1798 LONGBOW LANE CLEARWAYER FL T MACINA, ALFRED 1830 OAKLAKE DRIVE CLEARWAYER FL S HOGAN, ELWOOD J 1233 WELLINGTON DR	agent and the il applicable. AND DIRECTORS DELE DELE	(NOTE Registered 13. TE 1.1 TII 12 NA 1.3 ST 1.4 CI TE 2.1 TII 22 NA 23 ST 2.4 CI TE 3.1 TII 3.2 NA	LE ME REET ADDRESS LE ME ME ME REET ADDRESS LY - ST - ZIP LE ME REET ADDRESS LY - ST - ZIP LE	uired when reinstating)	DATE ERS AND DIRECTOR Change	☐ Additi	
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SIGNATURE:

ONATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTO

17 Mar 97 813 446-1718

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Apr 10 1997 8:00am

Secretary of State

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