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Mar 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # H28911 (6)
1. Corporation Name
CHARIS PLACE, INC.



Principal Place of Business Mailing Address
3647 CORTEZ ROAD WEST 3647 CORTEZ ROAD WEST
BRADENTON FL 34210 BRADENTON FL 34210

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25	Country	30	Country

3. Date Incorporated or Qualified 11/01/1984	
4. FEI Number 59-2469005	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CONARD, RICHARD T 3647 CORTEZ ROAD WEST BRADENTON FL 34210		10. Name and Address of New Registered Agent 81 Name Thomas B. Luzier 82 Street Address (P.O. Box Number is Not Acceptable) 2440 N. Tamiami Trail 83 84 City Nokomis FL 85 Zip Code 34275	
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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 *Thomas B. Luzier VP* 1/26/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDS	1.1 TITLE	President/CEO
NAME	CONARD, BETTY A	1.2 NAME	John F. Robenalt
STREET ADDRESS	3647 CORTEZ ROAD W.	1.3 STREET ADDRESS	2440 N. Tamiami Trail
CITY-ST-ZIP	BRADENTON FL 34210	1.4 CITY-ST-ZIP	Nokomis, FL 34275
TITLE	D	2.1 TITLE	V.P. Secretary
NAME	CONARD, RICHARD T	2.2 NAME	Thomas B. Luzier
STREET ADDRESS	3647 CORTEZ ROAD W.	2.3 STREET ADDRESS	2440 N. Tamiami Trail
CITY-ST-ZIP	BRADENTON FL 34210	2.4 CITY-ST-ZIP	Nokomis, FL 34275
TITLE		3.1 TITLE	CFO
NAME		3.2 NAME	Michael W. Monahan
STREET ADDRESS		3.3 STREET ADDRESS	2440 N. Tamiami Trail
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Nokomis, FL 34275
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 on an attachment with an address.

SIGNATURE: *Thomas B. Luzier VP* 1/26/98 941-966-3131

CR2E034 (10/97)