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

(7)

DOCUMENT # J24251

CHATEAU GENERAL PARTNER, INC.

FILED Jun 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									
518 BUNKERS COVE 518 BUNKERS COVE PANAMA CITY FL 32401 PANAMA CITY FL 32401			1			DO NOT MIDITE IN TABLE	DACE		
US		U\$	US			DO NOT WRITE IN THIS SPACE			
					<u></u>	3. Date Incorporated or Qualified 07/14/1986			
	2. Principal Place of Business 2a. Mailing Address					4. FEI Number	· · · · · ·	Applied For	
21		26				59-2794289	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	0	City & State				6. Election Campaign Financing \$5.00 May Be			
23	28					Trust Fund Contribution	Added	d to Fees	
Zip	Country	Zip	Cor	ıntry		8. This corporation owes or has paid the curr			
24	25	29	30			, o. o. o		☐ No	
	Name and Address of Curre	nt Registered Agent		ļ.,		10. Name and Address of New Registered A	gent		
BU	J rke , les W.			81	Name				
221 MCKENZIE AVE.				62	Street Addr	ress (P.O. Box Number is Not Acceptable)			
PANAMA CITY FL					2.00111001	Coo (
•••				83					
				84	City	FL.	85 Zip	Code	
				لــــــــــــــــــــــــــــــــــــــ				74	
office or r agent. I a	to t he provisions of Sections 607.05 egi <mark>ster</mark> ed agent, or both, in the Stat im f am iliar with, and accept the obliq	uz and 607 1508, Florida Statu e of Florida. Such change was jations of, Section 607.05 <mark>05,</mark> Fl	ies, the a authorize lorida Sta	d by lules.	the corporat	poration submits this statement for the purpose of lion's board of directors. I hereby accept the appr	changing pintment a	is registered is registered	
SIGNATURE	Signature: Typed or printed name of region rest a	just and alle if applicable (NC)	IE: Registoro	rd Agor	nt signature requir	red when reinstating) DATE			
12.	OFFICERS AF	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	AS	☐ DELETE	ELETE 1.5 TIT				Change	Addition	
NAME	B urke, les W.		1.2 N	AME					
STREET ADDRESS	221 MCKENZIE AVE.		1.3 S	IREET A	ADDRESS				
CITY-ST-ZIP	PANAMA CITY FL		1.4 C	ITY-ST	r- ZIP				
TITLE	SD	☐ DELETÉ	2.1 TI	I1LE			Change	Addition	
NAME	ARMSTRONG, LARRY		2.2 N	AME					
STREET ADDRESS	518 BUNKERS COVE RD		2.3 S	TREET A	ADDRESS				
CITY-ST-ZIP	PANAMA CITY FL			CITY-S					
TITLE	PO	DELETE	3.1 (1				Change	Addition	
NAME	ARMSTRONG, AMY		32 N	AME	1				
STREET ADDRESS	518 BUNKERS COVE RD				ADDRESS				
CITY-ST-ZIP	PANAMA CITY FL			CITY-S	į.				
TITLE		DELETE	411				☐ Change	Addition	
NAME		_	4 2 1				•		
STREET ADDRESS					ADORESS				
				11Y-S1					
CITY-ST-ZIP TITLE		DELFTE	5.1 TI		1-411		Change	Addition	
NAME			5.2 N				•		
					ADODECC				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		☐ DELETE	5.4 C	ITY-ST	I - ZII'		Change	Addition	
TITLE		C britit						الموسوس ـــــ	
NAME			6.2 N		I DODESCO				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			64C	ITY-ST	[- 7]P				

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