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FILED
Feb 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J40663

(3)

1. Corporation Name

CHARIS ENTERPRISES, INC.

Principal Place of Business

6937 STAPOINT CT
SUITE C
WINTER PARK FL 32782
US

Mailing Address

6937 STAPOINT CT.
SUITE C
WINTER PARK FL 32782
US

3. Date Incorporated or Qualified

11/03/1986

3a. Date of Last Report

03/18/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

59-2743522

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes

☒ No

9. Name and Address of Current Registered Agent

ROLL, JAMES M.
5129 TURKEY LAKE ROAD
ORLANDO FL 32819

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

1/21/97

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME ROLL, JAMES M.
STREET ADDRESS 5129 TURKEY LAKE RD.
CITY-ST-ZIP ORLANDO FL

TITLE V ☐ DELETE

NAME ROLL, JAMES D
STREET ADDRESS 2983 BURLINGTON DR
CITY-ST-ZIP APOPKA FL

TITLE V ☐ DELETE

NAME ROLL, LYLE F.
STREET ADDRESS 2119 CAESAR CT
CITY-ST-ZIP ORLANDO FL

TITLE V ☐ DELETE

NAME ROLL, NORMA S.
STREET ADDRESS 450 COUNTRY WOOD CIR
CITY-ST-ZIP LAKE MARY FL

TITLE V ☐ DELETE

NAME DURACK, GREGORY G.
STREET ADDRESS 7410 KEY COLONY #2024
CITY-ST-ZIP WINTER PARK FL

TITLE ST ☐ DELETE

NAME ROLL, PHYLLIS G.
STREET ADDRESS 5129 TURKEY LAKE ROAD
CITY-ST-ZIP ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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 do 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:

JAMES M. ROLL

2/10/97

407 671-5588

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (9/96)