

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

May 01 1996 8:00 am
Secretary of State

DOCUMENT # J54719

(6)

1. Corporation Name

THE CHAMBLESS CORPORATION

Principal Place of Business

1501 VENERA AVE.
SUITE 223
CORAL GABLES FL 33146

Mailing Address

1501 VENERA AVE.
SUITE 223
CORAL GABLES FL 33146



2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

FOGG, ALAN S., JR.
10845 SNAPPER CREEK RD.
MIAMI FL 33156

3. Date Incorporated or Qualified

01/26/1987

3a. Date of Last Report

05/16/1995

4. FEE Number

59-2766136

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. 189.032,
Florida Statutes ☐ Yes ☒ No

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 607.0501 and 607.1503, 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. The entity accepted the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0501, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FOGG, ALAN S. JR.
STREET ADDRESS	12 CHIMNEY POINT
CITY, ST, ZIP	TOXAWAY NC
TITLE	VPD
NAME	FOGG, ALAN S. JR.
STREET ADDRESS	10845 SNAPPER CREEK RD.
CITY, ST, ZIP	MIAMI FL
TITLE	VPTD
NAME	FOGG, STEPHEN M
STREET ADDRESS	13120 SW 92ND AVE., #D313
CITY, ST, ZIP	MIAMI FL
TITLE	VPD
NAME	RENTZ, RICHARD D
STREET ADDRESS	1021 MANATI AVE.
CITY, ST, ZIP	CORAL GABLES FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13.

1. TITLE	
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information indicated on this annual report or biennial 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; that the filing of this report is required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/96

305-665-5922

CR2E034 (12/95)