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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sangra B Mortham

Secretary of State
DIVISION OF CORPOHATIONS

1996

1. Corporation Name

DOCUMENT # J82951

(1)

CORBETT CHARTERS, INC.

Principal Place of Business Mailing Address									
998 BELLEVUE AVE. P.O. BOX 2556 DAYTONA BEACH FL 32114-5162			998 BELLEVUE AVE. P.O. BOX 2556 DAYTONA BEACH FL 32114-510				3. Date incorporated or Qualified 07/16/1987	3a. Date of Last Report 05/01/1995	
2.	Principal Place of Busine	ess	2a. Mailing	g Address			4. FEI Number 59-2856610		Applied For Not Applicable
21	Suite, Apt. #. etc.	Suite	Suite Apt #, etc			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
22	City & State		Fron '	State	,		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
23	Zip	Country	28		Country		8. This corporation has liability for Florida Statutes	intangible s 🔲 No	tax under s. 199.032,
24		25	29		30		10. Name and Address of New	Registere	d Agent
	CORBETT, PAT	AVE.	urrent Hegistered	Agent	81 82 83	Name Street Ad	dress (P.O. Box Number is Not Accepta		
DAYTONA BEACH FL 32014									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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

tarrinar wird	and accept the obligations of occurrence					
SIGNATURE	hat he typed on printed name of registered agent and the dispose of	. (NOTE B	gridered Agent signature n	ADDITIONS/CHANGES TO C	DATE	RS IN 12
12.	OFFICERS AND DIRECTOR	S	13.	ADDITIONS/GRANGES TO C	Char ge	☐ Addition
TITLE	DP	DELETE	1 1 Tifuf		[] Out. 8.	_
NAME	CORBETT, PATRICK E.		1.2 NAME			
STREET ADDRESS	142 CORAL CIRCLE		1.3 STREET ADDRESS			
	SOUTH DAYTONA FL		1.4 CiTY - \$1 - ZIP		Change	Addition
CITY-ST-ZIP TITLE	V	DELETE	2 1 TiTLE	Corbett, ELIZA	Change	L Addrion
ı	FREUND, ELIZABETH C		2.2 NAMÉ	CORDETT, CHIZA	been C.	
NAME	PO BOX 2655 N/A		2.3 STREET ADDRESS			
STREET ADDRESS	DAYTONA BCH FL		24 CITY - ST - 7/P			F1 4 4 400 cm
CITY - ST - ZIP	DATIONA BOTTLE	DELETE	3 1 HILF		☐ Change	Addition
TITLE			3.2 NAM5			
NAME			3.3 STREET ADDRESS			
STREET ADDRESS			3.4 Cith - ST - ZiP			
CiTY - ST - ZiP		DELETE	4 1 TillE		☐ Change	Add-tion
TITLE		[]	4.2 NAME			
NAME			4.3 STREET ADDRESS			
STREET ADDRESS			4.4.017 y - S1 - ZIP			
CITY - ST - ZIP		DELETE	5 1 TILE		☐ Change	☐ Addition
TITLE		Ditter	5.2 NAME			
NAME						
STREET ADORESS			5.3 STREET ADDRESS	3		
CITY - ST - ZIP		CT) DOLLER	5.4 CITY - ST - ZIF		Cnange	Addition
TITLE		DELF I'E	6 1 TIPLE			
NAME			62 NAME			
STREET ADDRESS			GISTRE LADDRESS	5		
CITY - ST - ZIP			4 CIT -S1-ZIP	ualify for the exemption stated in Section	119.07(3)(k), Florida Stal	utes. I further
U U. E.	the file	Transfer to the second of the	hetianerdoes not q	Mallih for the exemption armon in cooper.	- ale - ange local officet as	if made under

14. I do hereby certify that the information supplied with this tip concolumned and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this capital report of supply leader and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this capital report of supply leader and does not gualify that I am an officer or director of the corp hat for the report of the corp hat for an officer or director of the corp hat for the report of the corp hat the information indicated on this capital report of the corp hat the information indicated on this capital report of supply and the corp hat the information supplied to the corp hat the information indicated on this capital report is true and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further that I am an officer or director of the corp hat the information indicated on this capital report is true and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further that I am an officer or director of the corp hat the information indicated on this capital report is true and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further that I am an officer or director of the corp hat the information indicated on this capital report is true and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further that I am an officer or director of the corp hat the information indicated in Section 119.07(3)(k), Florida Statutes. I further that I am an officer or director of the corp hat the information indicated in Section 119.07(3)(k), Florida Statutes. I further that I am an officer or director of the corp hat the information indicated in Section 119.07(3) (k), Florida Statutes in the information indicated in Section 119.07(3) (k), Florida Statutes in the information indicated in Sect

SIGNATURE:

SIGNATURE AND TYPE OF MINTER NAME OF SIGNING OFFICER OR DIRECTOR

4-18-96 904-252-6875

CR2E034 (12/95)
