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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1330

(8)

1. Corporation Name CHARLES, MARGARET & CHERI, INC. Principal Place of Business Mailing Address 17105 SAN CARLOS BOULEVARD SUITE A-6 SHITE A-6					
	RS BEACH FL 33931	SUITE A-6 FORT MYERS BEACH FL 33931 US		3. Date Incorporated or Qualified 12/21/1987	3a. Date of Last Report 04/14/1995
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 65-0019104	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	e	City & State		6. Election Campaign Financing	\$5 00 May Ro
23 Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for in Florida Statutes Yes	□No
	9. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
5939 S	IFUSS, CHARLES W 1ST AVE CORAL FL 33914		82 Street Add 83 . 84 City	ress (P.O. Box Number is Not Acceptabl	FL 85 Zip Code
11. Pursuant or register familiar wi SIGNATURE	to the provisions of Sections 607.0 red agent, or both, in the State of Fith, and accept the obligations of, S	scrida. Such change was authorize Section 607.0505, Florida Statutes	tes, the above named corporated by the corporation's boals.	ration submits this statement for the purp rd of directors. I hereby accept the appoint	page of changing its registered office
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TITLE	PVST	☐ DELETE	1. 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS CHY+ST-ZIP	EODT MYCDO DEACH EL		1.2 NAME 1.3 STREET ADDRESS		
TITLE	D	DELETE	1.4 CITY-ST-ZIP 2 1 THLE		Change Addition
NAME STREFT ADDRESS	RAUCHFUSS, MARGARET 17105 SAN CARLOS BOU		2 2 NAME 2.3 STREET ADDRESS		. Samigo Ejinoakon
CITY-ST-ZiP	FORT MYERS BEACH FL		2 4 CITY - ST - ZIP		
TITLE NAME		☐ DELETE	3. 1 TITLE		Change Addition
STREET ADDRESS			3.2 NAME		
CITY-ST-ZIP			3.3. STREET ADDRESS		
TOLE		DELETE	3.4 CITY-ST-ZIP 4. 1 TITLE		Change
NAME			4.2 NAME		Change Addition
STREFT ADDRESS		•	4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5. 1 TITLE		Change Addition
NAME		 .	5.2 NAME	•	C - Sample C - Monthon
STHEET ADDRESS			5.3 STREET ADDRESS		
CITY-S*-ZIP			5.4 CHY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME		_	6.2 NAME		El annigh
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-S1-ZIP			6.4 CITY - ST - ZIP		
	y certify that the information supplied	ed with this filing is voluntarily furn	nished and does not qualify for	or the exemption stated in Section 119.0	07(3)(k), Florida Statutes, I further