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FILED

May 15 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 # **K49180** (8)
1. Corporation Name
CLASSY CHASSY OF BLANDING BOULEVARD, INC.



Principal Place of Business

6531 B BLANDING BLVD
JACKSONVILLE FL 32244
US

Mailing Address

PO BOX 54074
JACKSONVILLE FL 32245-4074
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

CRABTREE, R.R.
8375 DIX ELLIS TRAIL
SUITE 401
JACKSONVILLE FL 32266

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

3. Date Incorporated or Qualified

12/05/1988

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2920342

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

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS

TITLE DPT
NAME ASHTON, JEFFREY J.
STREET ADDRESS 2657 KERSEY CT.
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE VD
NAME ASHTON, R. S.
STREET ADDRESS 10439 INLET DR.
CITY-ST-ZIP JACKSONVILLE FL

☒ DELETE

TITLE S
NAME ASHTON, MELISSA A
STREET ADDRESS 2657 KERSEY
CITY-ST-ZIP JACKSONVILLE FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DPT
1.2 NAME ASHTON, JEFFREY J.
1.3 STREET ADDRESS 6531 B. BLANDING BLVD
1.4 CITY-ST-ZIP JACKSONVILLE, FL. 32244

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE S
3.2 NAME ASHTON, MELISSA A.
3.3 STREET ADDRESS 6531 B. BLANDING BLVD
3.4 CITY-ST-ZIP JACKSONVILLE, FL. 32244

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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, changed, or on an attachment with an address.

SIGNATURE

[Signature]

[Signature]

CR2E034 (9/96)