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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

L77773

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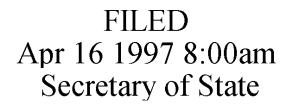
CHASE, U.S.A., INC.

Principal Place of Business

8900 CRYSTAL SPRINGS ROAD

Mailing Address

P.O. BOX 37197





JACKSONVILLE FL 32221 US		JACKSONVILLE FL 32238-7197 US			3. Date Incorporated or Qualified 06/05/1990	l	3a. Date of Last Report 07/30/1996	
	Jace of Business	2a. Mailing Address			4. FEI Number		Apr	olied For
21 8542	Frost Street North	26			59-3016703		Not	Applicable
Suite, Apt.	#, etc	Suite. Apt. #, etc.			5. Certificate of Status Desired		3.75 Ad Fee Req	dditional quired
City & Stati	e	City & State			Election Campaign Financing Trust Fund Contribution	Prompt .	5.00 M Added to	,
Zip	Country	Zip	Country		8. This corporation has liability for i			199.032,
24	25	29	30			Yes No		
	 Name and Address of Current YERS, LINDA D. 	Registered Agent	81 N	Name	10. Name and Address of New Re	gisterea Ageni	<u></u>	
_	O CRYSTAL SPRINGS ROAD - CKSONVILLE FL 32221		83	8543	SONVILLE			ode /
office or r	to the provisions of Sections 607,0502 egistered agent or both, in the State or or familiar with, and accept the obligations of the obligation of the control of the contro	f Florida. Such change was ons of, Section 607.0505, Fl	tes, the above-n authorized by th	amed corpo e corporatio	oration submits this statement for the pon's board of directors. I hereby accepted when reinstating)	ot the appointm	ent as r	egistered
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC			
TETLE	DPT	DELETE	1.1 TITLE			l ⊠ to	Change	Addition
NAME	Steyers, Linda D.		1.2 NAME		- , , . , . , . , . ,		,	
STREET ADDRESS	6900 CRYSTAL SPRINGS ROAD)	1.3 STREET ADI	DRESS 8	54a Frost Street	NORTH	f	
C-IY - ST - ZiP	JACKSONVILLE FL		1.4 CITY - S7 - Z	iP				
THEE	CEO	☐ DELETE	2.1 TITLE	ļ		()	Change	Addition
NAM:	BILLINGS, JAMES L,		2.2 NAME			1 - ALh		
STREET AUGIESS	8900 ORYSTAL SPRINGS ROAD)	2.3 STREET ADI	DRESS 85	542 Frost Street 1	NOTEN		
City - St - ZiP	JACKSONVILLE FL	- Allera	2. 4 C(TY - ST- Z	ZIP				T A days
TIDL !		DELETÉ "	3.1 TITLE			·	Change	Addition
NAM+			3.2 NAME					
SERELL ADDRESS			3.3 STREET ADV					
CHY-SI ZIP THEF		DELETE	34. CITY-ST-7 41 TITLE	ZIP		T 17	hange	Addition
NAME			4 2 NAME			٠ ٧		
STREET AUDRESS			4.3 STREET ADI	narce				
City St-Zer			4.4 City-St-Z					
1:111		DELETE	5.1 TITLE				Change	Addition
NAM:		-	5 2 NAME				*	
STREET ADORESS			5.3 STREET ADI	DRESS				
CITY+ST-Z0F			5.4 CITY - ST - Z					
MLF		DELETE	6.1 TITLE	·			Change	Addition
NAME			6.2 NAME				-	
STEELT ALUALISS			6.3 STREET AD	DRESS				
Crt r - ST- ZiP			6.4 CITY - ST - Z	1				
COLUMN TO SERVICE STATE OF THE SERVICE STATE STATE STATE STATE OF THE SERVICE STATE	L		0.7 OIT 01-Z	·	· ·			

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.

april 10, 1997 904-786-7288 Dayline Pitone