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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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Feb	12	1998	8:00am
Se	ecre	tary c	of State

	CH STREET STATION, INC	•			
Principal Place	e of Business	Mailing Address			ir Billin gebir didie Billis Ibbi
129 W. CHURCH ST. ORLANDO FL 32801		250 W. PRATT ST. 23RD FLOOR BALTIMORE MD 21201-2423		DO NOT WRITE IN THIS	SPACE
		US		3. Date Incorporated or Qualified 06/03/1988	
2. Principal Place of Business 21 Suite, Apt. #, etc		2a. Mailing Address		4. FEI Number	Applied For
		26		52-1858030	Not Applicable
		Suite, Apt. #, etc. /			\$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & State	D	City & State		6. Election Campaign Financing	\$5.00 May Be
:3		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
4	25	[29]	30		Yes No
	9, Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registered	Agent
	00 S. PINE ISLAND ROAD ANTATION FL 33324		B3	dress (P.O. Box Number is Not Acceptable)	
· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	84 City	FL	85 Zip Code
SIGNATURE			' '	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	_ -
SIGNATURE	Signature, typical or printed name of registered in		os, the above-named cor authorized by the corpora orida Statutes.	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	of changing its registered pointment as registered
SIGNATURE	Signature, typical or printed name of registered in	gent and title if applicable (NOT)	os, the above-named col authorized by the corpora orida Statutes. Registered Agent signature requ	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appured when relastating) DATE	of changing its registered pointment as registered
SIGNATURE 12.	Signature: typics or purpost rainer of registeres at OFFICERS AT DC AMBLER, BRUCE M	gent and title of n jopicable (NOT) ND (NR) CTORS	os, the above-named colluthorized by the corpora prida Statutes. Repistered Agent signature required.	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appured when relastating) DATE	of changing its registered pointment as registered D DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typical or purpost name of registeres and OFFICERS AT	gent and title of n jopicable (NOT) ND (NR) CTORS	os, the above-named columbrized by the corporation of Statutes. Fregistered Agent signature required. 13. 1.1 TITLE	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appured when relastating) DATE	of changing its registered pointment as registered D DIRECTORS IN 12
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SIGNATURE 12. TIFLE NAME STREET ADDRESS CITY-ST-ZIP	Signature: typica or purport name of registers for DC AMBLER, BRUCE M 250 W. PRATT ST.	gent and title of n jopicable (NOT) ND (NR) CTORS	os, the above-named consultorized by the corporation Statutes. Fregistered Agent signature requirements. 13. 13 TITLE 1.2 NAME 1.3 STHEET ADDRESS	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appured when relastating) DATE	of changing its registered pointment as registered D DIRECTORS IN 12
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ORLANDO FL 64 CITY-ST-ZIP 14. Thereby 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 is supplied entail 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 attackment with an address

5 3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELE 1E

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

BALTIMORE MD

ORLANDO FL

GILBERT, JOHN F.

129 W. CHURCH STREET

WINDHAM, ROBERT E.

129 W. CHURCH ST.

Dan R. Skowronski, Secretary 01/07/98 (410) 783 204

Change

☐ Addition

☐ Change ☐ Addition

CHURCH STREET STATION, INC.

12. Officers and Directors continued

V Ralph R. Rodriguez 129 W. Church Street Orlando, FL