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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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DIVISION OF CORPORATIONS
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DOCUMENT # N19743 (6)

1. Corporation Name

CHARLOTTE HARBOR ENVIRONMENTAL CENTER, INC.

Principal Place of Business	Mailing Address
10941 BURNT STORE ROAD PUNTA GORDA FL 33955	10941 BURNT STORE ROAD PUNTA GORDA FL 33955

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/19/1987
3a. Date of Last Report: 02/03/1994
4. FEI Number: 59-2853001 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

W. KEVIN RUSSELL, ESQUIRE
18501 MURDOCK CIRCLE
6TH FLOOR
PORT CHARLOTTE FL 33948

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	☐ Change ☐ Addition
NAME	CHEATHAM, ALTON L	1.2 NAME	
STREET ADDRESS	10941 BURNT STORE ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	RICE, MARYJUNE	2.2 NAME	
STREET ADDRESS	2150 WEST MARION AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	☐ Change ☐ Addition
NAME	ROLL, DONALD	3.2 NAME	
STREET ADDRESS	413 WEST GRACE STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	☐ Change ☐ Addition
NAME	FLESHMAN, BARBARA	4.2 NAME	
STREET ADDRESS	15550 BURNT STORE ROAD, #46	4.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☒ Change ☐ Addition
NAME	KIMBALL, KEN J	5.2 NAME	BERRICK, CHARLES
STREET ADDRESS	2211 BAYVIEW ROAD	5.3 STREET ADDRESS	20430 DIAL AVENUE
CITY-ST-ZIP	PUNTA GORDA FL	5.4 CITY-ST-ZIP	PORT CHARLOTTE, FL 33952
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	SWIFT, CHARLES L	6.2 NAME	
STREET ADDRESS	1084 HARBOURWAY PLACE	6.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Alton L Cheatham ALTON L. CHEATHAM 3-17-95 813-255-1120
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Daytime Phone #)
CHAIRMAN

0001316