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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N97000000301

1. Corporation Name  
CHARBAR APARTMENTS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business: 1825 COMMANCHE TRAIL, GULF BREEZE FL 32561  
Mailing Address: 1825 COMMANCHE TRAIL, GULF BREEZE FL 32561



2. Principal Place of Business: 21 P.O. Box 10388, Suite, Apt. #, etc. 22 Pensacola, FL, Zip 32524, Country USA  
2a. Mailing Address: 26 P.O. Box 10388, Suite, Apt. #, etc. 27 Pensacola FL, Zip 32524, Country USA  
3. Date Incorporated or Qualified: 01/03/1997  
4. FEI Number: NOT APPLICABLE, Applied For: Not Applicable  
5. Certificate of Status Desired: X, \$8.75 Additional Fee Required  
6. Election Campaign Financing: Trust Fund Contribution, \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent: ALLEN, CHERYL K, 1825 COMMANCHE TRAIL, GULF BREEZE FL 32561  
10. Name and Address of New Registered Agent: 81 Name: Richard J. Brown, 82 Street Address: 5205 Charbar Drive Apt A, 83, 84 City: Pensacola, FL, 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.  
SIGNATURE: *Richard J. Brown* DATE: 4-7-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D <input checked="" type="checkbox"/> DELETE	NAME: ALLEN, CHERYL K	1.1 TITLE: PVST/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS: 1825 COMMANCHE TRAIL		1.2 NAME: Richard J. Brown	
CITY-ST-ZIP: GULF BREEZE FL 32561		1.3 STREET ADDRESS: 5205 Charbar Drive	
TITLE: PVST <input checked="" type="checkbox"/> DELETE	NAME: ALLEN, CHERYL K	1.4 CITY-ST-ZIP: Pensacola FL	
STREET ADDRESS: 1825 COMMANCHE TRAIL		2.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP: GULF BREEZE FL 32561		2.2 NAME:	
TITLE: D <input type="checkbox"/> DELETE	NAME: JOHNSON, DAVID	2.3 STREET ADDRESS:	
STREET ADDRESS: 2501 GULF BREEZE PKWY		2.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP: GULF BREEZE FL 32561		3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D <input type="checkbox"/> DELETE	NAME: LAMBERT, R. G.	3.2 NAME:	
STREET ADDRESS: 5874 CURTIS ROAD		3.3 STREET ADDRESS:	
CITY-ST-ZIP: PACE FL 32571		3.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE:		4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME:	
STREET ADDRESS:		4.3 STREET ADDRESS:	
CITY-ST-ZIP:		4.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE:		5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE:		6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME:	
STREET ADDRESS:		6.3 STREET ADDRESS:	
CITY-ST-ZIP:		6.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard J. Brown* DATE: 4-7-99 DAYTIME PHONE #: 850-857-0606

CR2E037\_ (11/98)