FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P07856

(8)

FILED

Feb 11 1998 8:00am

Secretary of State

CHAMP	Name NON REALTY CORPORATION	1							
4.4.4.									
Principal Place	e of Business	Mailing Address			-	1 (00/00) (I) 1 0/1 (184) / 0/8/ 0/11 0/		i Eiğil Bibli Bibli	, DHOIL HOLL
18825 NORTHCHASE DR ONE CHAMPION PLAZA									
SUITE 800 STAMFORD CT 06921				DO NOT WRITE IN THIS SPACE			CDACE	4	
HOUSTON TX	77080-087				-	3. Date Incorporated or Qualified	: IN ITIS	SPACE	
•						10/24/1985			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26				13-2694188			t Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A Fee Re	
City & State	0	City & State				6. Election Campaign Financing	_	\$5.00	May Be
23		28				Trust Fund Contribution		Added t	
Z₁p □	Country	Zip	Count	ry		8. This corporation owes or has pa			
24	25 29 30 9. Name and Address of Current Registered Agent			Personal Property Tax due June 30. Yes X No 10. Name and Address of New Registered Agent				7 140	
US	S. CORPORATION COMPANY	Trogistoro rigorii	6	1 Name					
1201 HAYES ST SUITE 105			8	2 Ctroot A	ddroon	(P.O. Box Number is Not Acceptal	blo)		
TALLAHASSEE FL 32301			ľ	Z Slieel A	NUUIBSS	(F.O. Box Norther is Not Acceptat	J10)		
		•	8	3					
			8	4 City			FL	85 Zip (Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, to office or registered agent, or both, in the State of Florida, Such change was auth				ve-named o	corpora	ation submits this statement for the			s registered
office or r	registered agent, or both, in the State c im familiar with, and accept the obligat	of Florida, Such change was a	authorized	by the corpo	oration	's board of directors. I hereby acce	pt the ap	pointment as	registered
	in ramilal with, and accept the congar	idins of, decidor box dood, i i	Jikia Siatut	oa.					
SIGNATURE	Signature, typed or printed name of regelered agent	and third applicable (NOI		gent signature r	required w	hen reinstating)	DATE		
12.	OFFICERS AND		13.	1		ADDITIONS/CHANGES TO OFFIC	CERS AN		
TITLE	D Cole, Aubrey L.	☐ DELETE	1.1 TITLE					Change	Addition
NAME	16825 NORTHCHASE DRIVE		1.2 NAME						
STREET ADDRESS	HOUSTON TX			1.3 STREET ADDRESS 1.4 CITY - ST - ZIP					
CITY-ST-ZIP TITLE	VP	DELETE	2.1 TITLE					Change	Addition
NAME	DANIELS, E. H. NI	L otter	2.2 NAM						
STREET ADDRESS	16825 NORTHCHASE #800		2 3 STREET ADDRESS						
CITY+ST-ZIP	HOUSTON TX		2 4 CITY-ST-ZIP						
TITLE	T	DELETE		3.1 TITLE				Change	Addition
NAME	HENNINGS, BARBARA		3.2 NAM	E					
STREET ADDRESS	16825 NORTHCHASE DRIVE		3.3 STRE	3.3 STREET ADDRESS					
CITY-ST-ZIP	HOUSTON FL		3.4. CITY	3.4. CITY - ST - ZIP					
TITLE	V	☐ DELETE	4.1 TITLE					Change	Addition
NAME	VOLPE, THOMAS F		4. 2 NAN						
STREET ADDRESS	ONE CHAMPION PLAZA			et address					
CITY-ST-ZIP	STAMFORD CT	DELETE		- ST - ZIP				Change	Addition
TITLE	CD NICHOLS, KENWOOD C.		5.1 TITLE					- viaigo	المساور ب
NAME STREET ADDRESS	ONE CHANDION DI AZA			5.2 NAME 5.3 STREET ADDRESS					
CITY-ST-ZIP	OTAMEODD OT			-ST-ZIP					
TITLE	D	DELETE	6 1 TiTL					Change	Addition
NAME	BOSSIDY, LAWRENCE A	A LAUGENSE A		E				-	
STREET ADDRESS	ONE CHAMPION PLAZA			ET ADDRESS					
CITY-ST-ZIP	STAMFORD CT			-ST-ZIP					

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 trusted 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 allachment with an officers.

SIGNATURE:

203-358-7472