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03-01-1999 90202 043 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P93000038831

1. Corporation Name JOHN ED CHAMBERS, III, ENTERPRISES, INC.

Principal Place of Business 225 WATER ST SUITE 1800 JACKSONVILLE FL 32202
Mailing Address 225 WATER ST SUITE 1800 JACKSONVILLE FL 32202



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/01/1993
4. FEI Number 59-3184710
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax.

2. Principal Place of Business 21, 22, 23, 24
2a. Mailing Address 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent CHUNN, DOUGLAS D 1800 FIRST UNION NATIONAL BANK TOWER 225 WATER ST JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent 81 Name Smith Hulsey & Busey 82 Street Address 225 Water Street, Suite 1800 84 City Jacksonville FL 85 Zip Code 32202

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 of registered agent: Smith Hulsey & Busey, Vice President

12. OFFICERS AND DIRECTORS
TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP
DP CHAMBERS, JOHN E III 901 MAIN DANVILLE AR

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP
2.1 TITLE, 2.2 NAME, 2.3 STREET ADDRESS, 2.4 CITY-ST-ZIP
3.1 TITLE, 3.2 NAME, 3.3 STREET ADDRESS, 3.4 CITY-ST-ZIP
4.1 TITLE, 4.2 NAME, 4.3 STREET ADDRESS, 4.4 CITY-ST-ZIP
5.1 TITLE, 5.2 NAME, 5.3 STREET ADDRESS, 5.4 CITY-ST-ZIP
6.1 TITLE, 6.2 NAME, 6.3 STREET ADDRESS, 6.4 CITY-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 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, with all other like empowered.

SIGNATURE: John Ed Chambers III 1/20/99 501-495-4692
Date Daytime Phone #

CR2E034 (11/98)