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FILED
Jul 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000045148 (2)

1. Corporation Name
CHERRY HILLS DEVELOPMENT, INC.



Principal Place of Business
3690 CHERRY HILLS CT
GREEN COVE SPRINGS FL 32043
US

Mailing Address
3690 CHERRY HILLS CT
GREEN COVE SPRINGS FL 32043
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/14/1993

4. FEI Number
59-3226500

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

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 GREEN COVE SPRINGS FL

24 32043 25 U.S.

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 City & State

29 Zip Country

10. Name and Address of New Registered Agent

81 Name GEORGE R. GUESS

82 Street Address (P.O. Box Number is Not Acceptable)
1856 COLONIAL DR

83

84 City GREEN COVE SPRINGS FL 85 Zip Code 32043

9. Name and Address of Current Registered Agent

VAN ROYAL, BERT
3816 MAGNOLIA POINT BLVD.
GREEN COVE SPRINGS FL 32043

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 *George R. Guess*

GEORGE R. GUESS

4/30/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME SCHWATLO, WINFRIED
STREET ADDRESS 3816 MAGNOLIA POINT BLVD.
CITY-ST-ZIP GREEN COVE SPRINGS FL 32043

TITLE VST
NAME VAN ROYAL, BERT
STREET ADDRESS 3816 MAGNOLIA POINT BLVD.
CITY-ST-ZIP GREEN COVE SPRINGS FL 32043

TITLE S
NAME VAN ROYAL, BERT
STREET ADDRESS 3816 MAGNOLIA POINT BLVD
CITY-ST-ZIP GREEN COVE SPRINGS FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 3690 CHERRY HILLS CT
1.4 CITY-ST-ZIP GREEN COVE SPRINGS, FL 32043

2.1 TITLE VST
2.2 NAME GUESS, GEORGE R.
2.3 STREET ADDRESS 3690 CHERRY HILLS CT
2.4 CITY-ST-ZIP GREEN COVE SPRINGS, FL 32043

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

CR2E034 (10/97)