FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000034942 (0)**

1. Corporation Name

CHASE PHOTOGRAPHY, INC.

Principal Place of Business	Mailing Address
6121 COLLINS ROAD SUITE 142 JACKSONVILLE FL 32244	6121 COLLINS ROAD SUITE 142 JACKSONVILLE FL 32244

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/06/1994 | 3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 6001-27 ARGYLE FOREST BLVD.	26 6001-27 ARGYLE FOREST BLVD.
Suite, Apt. #, etc. 22 SUITE 224	Suite, Apt. #, etc. 27 SUITE 224
City & State 23 JACKSONVILLE, FL.	City & State 28 JACKSONVILLE, FL.
Zip 24 32244	Country 25 USA
	Zip 29 32244
	Country 30 USA

4. FEI Number: 59-3249860 — 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 has liability for intangible tax under S. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

REMSEN, KENNETH M
6121 COLLINS ROAD
SUITE 142
JACKSONVILLE FL 32244

10. Name and Address of New Registered Agent

81 Name: KENNETH M. REMSEN
82 Street Address (P.O. Box Number is Not Acceptable): 426 HARVEST BEND DR.
83
84 City: ORANGE PARK FL 85 Zip Code: 32073

11. Pursuant to the provisions of Sections 607.0502 and 607.150B, 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: Kenneth M. Remsen — KENNETH M. REMSEN (NOTE: Registered Agent Signature required when reinstating) — DATE: APRIL 24, 1995

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE		☒ Change ☐ Addition
NAME	REMSEM, KENNETH M	12 NAME		
STREET ADDRESS	6121 COLLINS ROAD, #142	13 STREET ADDRESS	426 HARVEST BEND DR.	
CITY-ST-ZIP	JACKSONVILLE FL 32244	14 CITY-ST-ZIP	~~JACKSO~~ ORANGE PARK, FL. 32073	
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	LEWIS, STEPHEN R	22 NAME		
STREET ADDRESS	6371 TINTERN CIRCLE WEST	23 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32244	24 CITY-ST-ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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)(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.

SIGNATURE: Kenneth M. Remsen — KENNETH M. REMSEN 4/24/95 — 904-278-2775
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0024943 CF