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 #

P94000068654 (0)

CHARTWELL, INC.

CITY-ST-2IP

FILED
Apr 24 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/19/1994				
1610 INDEPENDENT SOUARE 1610 JACKSONVILLE FL 32202 US		1610 INDEPENDENT SQUARE 1610 JACKSONVILLE FL 32202 US								
21	incipal Place of Business	2a. Mailing Address 26				4,	FEI Number 59-3273355		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5.	Certificate of Status Desired		. 75 Additional ee Required	
23	ty & State	City & State				6.	Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees	
Zi 24	25 29 30			ountry		8. This corporation owes or has paid the current/year Intangible Personal Property Tax due June 30. Yes No				
Name and Address of Current Registered Agent					Name	10.	Name and Address of New Registered	Agent		
	LANIGAN, ARMINDIA M			81	Name					
1610 INDEPENDENT SQUARE JACKSONVILLE FL 32202			82	Street Addre	treet Address (P.O. Box Number is Not Acceptable)					
	THE PERSON NAMED IN COLUMN			83						
				84	City		Fl	85	Zip Code	
0	Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the Stati agent. I am familiar with, and accept the oblig	e of Florida. Such cha	ange was authorize	ed by	the corporation	oratio on's t	on submits this statement for the purpose opered of directors. I hereby accept the ap	of chang pointme	ing its registered int as registered	

amuration M. Saniga Armindia M. Rangan (NOTE: Registered Agent signature required when relistating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change ☐ Addition STEIN, ROBERT L NAME 1.2 NAME **1610 INDEPENDENT SQUARE** STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CHY-ST-ZIP CEO DELETE Addition Change TITLE 2.1 TITLE **PURCELL, KENNETH** NAME 2.2 NAME **161 INDEPENDENT SQUARE** STREET ADDRESS 2 3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE MARINATOS, ANTHONY NAME 3.2 NAME **1610 INDEPENDENT SQUARE** STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change ___ Addition 4.1 TITLE LANIGAN, ARMINDIA NAME 4. 2 NAME 1610 INDEPENDENT SQUARE STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 4.4 City - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 THLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 suppliemental 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.

6.4 CITY - ST - ZIP

CR2E034 (10/