

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000083517 (0)**

1. Corporation Name:
CHIEFLAND REALTY, INC.



Principal Place of Business: **1009 NW 9TH AVENUE ST. 3 CHIEFLND FL 32626 US**
Mailing Address: **P.O. BOX 2313 CHIEFLND FL 32644-2313 US**

2. Principal Place of Business: **21 everything is same as last year**
2a. Mailing Address: **27**
22. City & State: **23**
23. Zip: **24** Country: **25** Zip: **29** Country: **30**

3. Date Incorporated or Qualified: **11/14/1994** 3a. Date of Last Report: **06/28/1995**
4. FEI Number: **59-3277736** 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:
**BYRD, MARY V
5771 NW CR 336
CHIEFLND FL 32626-6820**

10. Name and Address of New Registered Agent:
81 Name: **XXXXXXXXXXXX same as last year**
82 Street Address (P.O. Box Number is Not Acceptable): **XXXXXXXXXXXXXXXXXXXX**
83
84 City: **FL** 85 Zip Code:

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 607.0506, Florida Statutes.

SIGNATURE: *Mary V Byrd - MARY V. BYRD* DATE: **7-19-96**

12. OFFICERS AND DIRECTORS

1	D GEIGER, ANGELA T 1305 NW 19TH AVE CHIEFLND FL 32626	<input type="checkbox"/> DELETE
2	P BYRD, MARY V 5771 N.W. CR. 336 CHIEFLND FL 32626-6820	<input type="checkbox"/> DELETE
3		<input type="checkbox"/> DELETE
4		<input type="checkbox"/> DELETE
5		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(k), 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: *Mary V Byrd* MARY V. BYRD DATE: **1-19-96** (352) 493-0091

CR2E034 (12/95)