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FILED
May 12 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 # P94000084607 (8)

1. Corporation Name
CHIP HUBER, INC.

Principal Place of Business

Mailing Address

2123 PARTER LAKE DR
UNIT A
SARASOTA FL 34240-5653
US

2123 PORTER LAKE DR
UNIT A
SARASOTA FL 24240-5653
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/17/1994

4. FEI Number

65-0537759

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

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

VOLZ, VIRGINIA C
400 GOLDEN GATE POINT
SUITE 11
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

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

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 607.0505, Florida Statutes.

SIGNATURE

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 ☐ DELETE

NAME VOLZ, VIRGINIA C.
STREET ADDRESS 400 GOLDEN GATE PT #1
CITY-ST-ZIP SARASOTA FL

TITLE T ☐ DELETE

NAME VOLY, DONALD
STREET ADDRESS 400 GOLDEN GATE PT #1
CITY-ST-ZIP SARASOTA FL

TITLE S ☐ DELETE

NAME HUBER, VICKI
STREET ADDRESS 4179 WINNERS CIR #416
CITY-ST-ZIP SARASOTA FL

TITLE VP ☐ DELETE

NAME HUBER, CHARLES
STREET ADDRESS 4179 WINNERS CIR., #416
CITY-ST-ZIP SARASOTA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Treasurer
VOLZ, DONALD
2.3 STREET ADDRESS SAME
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME Secretary
Huber, Vicki
3.3 STREET ADDRESS 5601 Merrimac Dr.
3.4 CITY-ST-ZIP Sarasota, FL 34234

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME VP
Huber, Charles
4.3 STREET ADDRESS 5601 Merrimac Dr.
4.4 CITY-ST-ZIP Sarasota, FL 34231

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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.

SIGNATURE:

Donald P. Volz

4/29/98 941-378-8253

CR2E034 (10/97)