

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P94000088244 (6)

1. Corporation Name

CHUCK STEVENS ENTERPRISES, INC.

FILED
95 AUG -8 AM 10:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

Mailing Address

**3231 SE SLATER STREET
STUART FL 34997**

**3231 SE SLATER STREET
STUART FL 34997**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/01/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FET Number

65-0544248

Applied For

Not Applicable

State, Apt. #, etc.

State, Apt. #, etc.

5. Certificate of Status Desired

22

27

**\$8.75 Additional
Fee Required**

City & State

City & State

6. Election Campaign Financing
Trust Fund Contributions

23

28

**\$5.00 May Be
Added to Fees**

24

25

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8. This corporation has not filed its financial statement for 1994 with the Florida Statutes. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BOVIE, GEORGE F III
555 COLORADO AVENUE
STUART FL 34994**

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 609, 610, 611, and 612 of the 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 609 of the Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Secretary of State)

(Signature of Registered Agent or Secretary of State)

DATE

12

OFFICERS AND DIRECTORS

13

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If Any)

NAME

**D
STEVENS, CHUCK
3231 SE SLATER STREET
STUART FL 34997**

1. NAME

2. STREET ADDRESS

3. CITY, ST. ZIP

☐ Change ☐ Addition

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