## 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 # P95000031899 (4)

"C" VENTURE CHARTER COMPANY

**162 ANCHOR DRIVE** 

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

|   |   |                                    |                                     |                          |                       |                                  |   | <b>11</b>  |
|---|---|------------------------------------|-------------------------------------|--------------------------|-----------------------|----------------------------------|---|--|
| Principal Place of Business Mailing Address |   |                                    | Address                             |                          |                       |                                  |   | ** ***** ***** ***** **** **** ****                    |
| 162 ANCHOR                                  |   | 162 ANCHOR DRIVE                   |                                     |                          |                       |                                  |   |  |
| VERO BEAC                                   | H FL 32963  | VERO BEACH FL 32963                |                                     |                          |                       |                                  | DO NOT WRITE IN THIS SPACE  |  |
| }   |   |                                    |                                     |                          |                       |                                  | 3. Date Incorporated or Qualified   |  |
|   |   |                                    |                                     |                          |                       |                                  | 04/24/1995  |  |
| 2. Principal P                              | Place of Business   | 2a. Mailing Address                |                                     |                          |                       |                                  | 4. FEI Number   | Applied For  |
| 21  |   | 26                                 |                                     |                          |                       | 65-0574144                       | Not Applicable  |  |
| Suite, Apt.                                 | #, etc.   | Suite, Apt. #, etc.                |                                     |                          |                       | 5. Certificate of Status Desired | \$8.75 Additional   |  |
| 22  |   | 27                                 |                                     |                          |                       | 6. Certificate of Status Desired | Fee Required  |  |
| City & Stat                                 | te .  | City & State                       |                                     |                          |                       | 6. Election Campaign Financing   | \$5.00 May Be   |  |
| 23  | ····  | 28                                 |                                     |                          |                       |                                  | Trust Fund Contribution   | Added to Fees  |
| Zip   |   |                                    | Zip Cou                             |                          | ıntry                 |                                  | 8. This corporation owes or has paid the  |  |
| 24  | [25]  | 29                                 |                                     | 30                       |                       | ·                                | Personal Property Tax due June 30.  | ∐ Yes ∐ No   |
|   | 9. Name and Address of Curre  | nt Registered                      | Agent                               |                          | 201                   |                                  | 10. Name and Address of New Registe   | red Agent  |
|   | ENNELL, TODD W  |                                    |                                     |                          | 81                    | Name                             | •   |  |
|   | 9 BEACHLAND BLVD.   |                                    | 82 Street Ad                        |                          |                       | Street Addre                     | ss (P.O. Box Number is Not Acceptable)  |  |
| VE  | FRO BEACH FL 32963  |                                    |                                     |                          |                       |                                  |   |  |
|   |   |                                    |                                     |                          | 83                    |                                  |   |  |
|   |   |                                    |                                     |                          | 84                    | City                             |   | 85 Zip Code  |
|   |   |                                    |                                     |                          |                       |                                  |   | -L   60 2 15 0000                                      |
| 11. Pursuant                                | to the provisions of Sections 607.050 registered egent or will in the State | )2 and 607.150<br>a of Florida. Su | 08, Florida Statu<br>ich change was | tes, the al<br>authorize | g pa                  | -named corpo<br>the corporatio   | oration submits this statement for the purpos<br>on's board of directors. I hereby accept the | e of changing its registered appointment as registered |
| agent. La                                   | m familiar with and ept the oblig   | ations of, Sect                    | tion 607.0505, F                    | lorida Stat              | lutes                 |                                  |   |  |
| SIGNATURE                                   | 1 /www.   |                                    |                                     |                          | ( r                   | retain                           | same registered age   |  |
| 10  | Signature, types of printed name of registered ag                           |                                    |                                     |                          | d Age                 | ni signature required            |   | -  |
| 12.<br>TITLE                                | OFFICERS AN   | ID DIRECTORS                       | DELETE                              | 13.                      | 71.5                  | <del></del>                      | ADDITIONS/CHANGES TO OFFICERS   | Change Addition  |
|   | CALDADONE ANTHONY   |                                    |                                     |                          |                       |                                  |   | C Citalige C Addition                                  |
| NAME  | CALDARONE, ANTHONY J 162 ANCHOR DRIVE                                       |                                    |                                     | 1.2 N                    |                       |                                  |   |  |
| STREET ADDRESS                              | VERO BEACH FL 32963   |                                    |                                     |                          |                       | ADDRESS                          |   |  |
| CITY-ST-ZIP                                 | SVPS  |                                    | DELETE                              |                          | TY-SI                 | I - ZIP                          |   | Change Addition  |
| 1   | l 5115  |                                    |                                     |                          | 2.1 TITLE<br>2.2 NAME |                                  |   | C Citarian C Manual                                    |
| NAME  | CALDARONE, JOYCE P  |                                    |                                     | 1                        |                       |                                  |   |  |
| STREET ADDRESS                              | 162 ANCHOR DRIVE  |                                    |                                     |                          |                       | address                          |   |  |
| CITY - ST - ZIP                             | VERO BEACH FL 32963   |                                    | DELETE                              |                          | ITY-S                 | T-ZIP                            |   | Change Addition  |
| TITLE                                       | VP  |                                    | ME DECEIE                           | 3.1 71                   |                       |                                  |   | Cusude Chydaindu                                       |
| NAME  | CORCORAN, ROBERT  |                                    |                                     | 3.2 N                    |                       | [                                |   | ļ  |
| STREET ADDRESS                              | 162 ANCHOR DRIVE  |                                    |                                     |                          |                       | adoress                          |   |  |
| CITY-ST-ZIP                                 | VERO BEACH FL 32963   |                                    | Deleve                              |                          | ITY-S                 | 1- ZIP                           |   | [] Ot  |
| TITLE                                       | VP  |                                    | ☐ DELETE                            | 4.1 TO                   |                       | 1                                |   | Change Addition  |
| NAME  | BEI, CAROL  |                                    |                                     | 4.2 N                    |                       | İ                                |   |  |
| STREET ADORESS                              | 162 ANCHOR DRIVE  |                                    |                                     |                          |                       | ADORESS                          |   |  |
| CITY-ST-ZIP                                 | VERO BEACH FL 32963   |                                    |                                     | 4.4 CI                   |                       | - ZIP                            |   |  |
| TITLE                                       |   |                                    | ☐ DELETE                            | 5.1 TI                   |                       |                                  |   | Change Addition  |
| NAME  | COFFIN, TUCKER  |                                    |                                     | 5.2 N                    |                       | 1                                |   |  |
| STREET ADDRESS                              | 162 ANCHOR DRIVE  |                                    |                                     | 5.3 S1                   | AEET .                | ADDRESS                          |   |  |
| CITY-ST-ZIP                                 | VERO BEACH FL 32963   | ·-·-                               |                                     | 5.4 CI                   |                       | 1-219                            |   |  |
| TITLE                                       | AS  |                                    | DELETE                              | 6.1 11                   | TLE                   |                                  |   | Change L. Addition                                     |
| NAME  | MAGEE, MARY   |                                    |                                     | 6.2 NA                   | 4ME                   | 1                                |   |  |

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 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 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 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 in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certificated in Section 119.07(3)(iii), Florida Statutes. I further certify that the information indicated in Section 1

6 3 STREET ADDRESS

Anthony J. Caldarone

(561) 231-1112

**FILED** 

Apr 16 1998 8:00am

Secretary of State