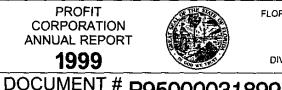
SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90032 001 ***550.00

	TURE CHARTER COMPANY	Mailing Address				
Principal Place of Business Mailing Address 162 ANCHOR DRIVE VERO BEACH FL 32963 VERO BEACH FL 32963						
					DO NOT WRITE IN T	HIS SPACE
					3. Date Incorporated or Qualified	i
2. Principal f	Place of Business	2a. Mailing Address			04/24/1995 4. FEI Number	Applied For
21	¬				65-0574144	Not Applicable
		Suite, Apt. #, etc.			, ,	\$8.75 Additional
27			' -		5. Certificate of Status Desired	Fee Required
		City & State	ate		6. Etection Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 4	Country	Zip	Country	,	8. This corporation owes the current year	
4	9. Name and Address of Curre	nt Registered Agent	30		Intangible Personal Property. 10. Name and Address of New Registe	
	2. Hanile and Address of Ourie	in neglisioled Agein	81	Name	16. House and Address of Hew Kediste	ieu Agent
FENNELL, TODD W			82	<u> </u>	dress (P.O. Box Number is Not Acceptable)	
979 BEACHLAND BLVD. VERO BEACH FL 32963				<u> </u>		
VC(O BENOTI FE 32903		83			
			84	84 City FL 85 Zip Co		85 Zip Code
11. Pursuan	nt to the provisions of sections 607.050	2 and 607.1508, Florida Statute	s, the above	-named corpo	ration submits this statement for the purpose	of changing its registered
ottice or agent. I	registered agent, or both, in the State am familiar with, and accept the oblic	e of Florida. Such change was a pations of, section 607.0505, Flo	iuthorized by orida Statute	, the corporations.	on's board of directors. I hereby accept the ap-	ppointment as registered
IGNATURE	1994	,				
				E: Registered Agent signature required when reinstating) DATE		
2.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS	
J.E	PD AND AND AND AND AND AND AND AND AND AN	DELETE	1.1 TITLE	}		Change Addition
ME	CALDARONE, ANTHONY J		1.2 NAME			
REET ADDRESS	162 ANCHOR DRIVE		1	FADDRESS		
Y-ST-ZIP LE	VERO BEACH FL 32963 SVPS	——————————————————————————————————————	1.4 CITY-S	T-ZIP		
	CALDARONE, JOYCE P	L DELETE	2.1 TITLE			Change Addition
ME	444 41101105 50115		2.2 NAME			}
REET ADDRESS	VERO BEACH FL 32963	-	2.3 STREET	1		
Y-ST-ZIP _E	VP	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE			Change Addition
Æ	BEI, CAROL	NA DELEJE	3.2 NAME			L_ Change L_ Addition
EET ADDRESS	162 ANCHOR DRIVE		3.3 STREET ADDRESS			
/-ST-ZIP	VERO BEACH FL 32963		3.4 CITY-S			
E	T	DELETE	4.1 TITLE	-		Change Addition
1E	COFFIN, TUCKER		4.2 NAME			C Change C Addition
EET ADDRESS	162 ANCHOR DRIVE		4.3 STREET	ADORESS		
-ST-ZIP	VERO BEACH FL 32963		4.4 CITY-ST	r-ZIP		
=	AS	DELETE	5.1 TITLE			Change Addition
ε	MAGEE, MARY	_ _	5.2 NAME			
'ET ADDRESS	162 ANCHOR DRIVE		5.3 STREET	ADDRESS		{
ST-ZIP	VERO BEACH FL 32963		5.4 CITY-S1	r-ZIP		
		DELETE	6.1 TITLE			Change Addition
Ī	}		6.2 NAME	Ì		
ET ADDRESS	1		6.3 STREET	ADDRESS		}

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 n Block 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

GNATURE: