## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1**9**98



ELORIDA DEPARTMENT OF STATE

**FILED** 

Jun 18 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000054259 (3)

CHELTON PROPERTIES, INC.

ONLETON THOSE ENTREOS INCO							
Principal Place of Business	Ma	ailing Address					
P.O. BOX 2128	P.	O. BOX 2128					
WINTER PARK FL 32790-2128		INTER PARK FL 32790	)-2128			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						07/07/1995	
2. Principal Place of Business	2a.	Mailing Address				4. FEI Number Applied For	,
21	26					59-3327004 Not Applica	
Suite, Apt. #, etc.	1-21	Suite, Apt. #, etc.				\$9.75 Additions	
22	27					5. Certificate of Status Desired Fee Required	•
City & State		City & State			*	6. Election Campaign Financing \$5.00 May Be	
23	28					Trust Fund Contribution Added to Fees	
Zip Country		Zφ Co		ry		8. This corporation owes or has paid the current year Intangible	
24 25	29		30	·		Personal Property Tax due June 30. Yes No	
9. Name and Address of Curre	ent Regis	lered Agent		1		10. Name and Address of New Registered Agent	
WHITE, W. GRAHAM			8	1	Name		
250 PARK AVENUE SOUTH			8	2	Street Addre	ess (P.O. Box Number is Not Acceptable)	
P.O. BOX 880				$\downarrow$			
WINTER PARK FL 32790-0880			8	3			
			8	4	City	85 Zip Code	
44 Durement to the previous of Continue COV Of	on wise či	77 11 (10) Florido Crot.	day the place	_l_		FL 63 P COOL	
office or registered agent, or both in the Stat	e of Florig	ta <sub>.</sub> Such change was	nes, the abo authorized l	ve. by 1	the corporation	oration submits this statement for the purpose of changing its register on's board of directors. Thereby accept the appointment as registere	rea d
agent. I am familiar with, and accept the oblig	gations of	, Section 607.0505, F	lorida Statut	0\$.		, , , , ,	
SIGNATURE Signature typic Lor prode direction of registere. La	and an abili					id when renstating) DATE	
12. OFFICERS AT			13.	Held	a signature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P		DELETE	1.1 1111.6		<del>-</del>	Change Addi	tion
NAME MULLER, CHANDLER R SR			1.2 NAM				
STREET ADDRESS 1150 LOUISIANA AVENUE					ADDRESS		
CITY-ST-ZIP WINTER PARK FL 32790-212	28		1.4 CITY				
ше <b>87</b>		DELETE	2.1 111LE			Change Addi	tion
NAME MULLER, JUDY H			2.2 NAM!				
STREET ADDRESS 1150 LOUISIANA AVENUE, S	UITE 2		2 3 STHE		ADDRESS		
CITY-ST-ZIP WINTER PARK FL 32790-212			2. 4 CITY		i	•	
TITLE	:	DEFIL	3 1 TITLE		2.11	☐ Change ☐ Addi	lion
NAME			3.2 NAME				
STHEET ADDRESS			3.3 STREE		ADDRESS		
CITY-SI-ZIP			3.4 CITY				
TITLE		DOLETE	4 1 1/11/16			☐ Change ☐ Addi	tion
NAME			4. 2 NAM	E		_ <b>.</b>	Į
STREET ADDRESS			4 3 STREE		ADDRESS		
CITY-ST-ZIP			4.4 CITY-	SI-	- ZIP		
TITLE		☐ DFLF1E	5.1 TITLE			Change Addit	tion
NAME			5.2 NAME				
STREET ADDRESS			5.3 STHE		LDDRESS		
CITY-ST-ZIP			5.4 CITY		j		
TITLE		DELETE	6 1 THEF		<del> </del>	Change Addil	tion
NAME			6.2 NAME				
STREET ADDRESS			6 3 STREE	T AL	ADDRESS		
CITY-ST-ZIP			6.4 CITY -	ST-	- ZIP		}

14. Thereby cortify that the information supplied with this filling 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 is true and accurate and that my signature shall have the same logal 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 13 in Chapter 607 or on an attachment with an address.

C10108