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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000056754 (1)

CHAPEL DEVELOPMENT, INC.

Principal Place of	Produces a	
i Principal Place of	HUSINASS	
1 111101000 11000 01	000,1000	

\$339 VILLAGE MARKET WESLEY CHAPEL FL 33543

SIGNATURE:

Mailing Address

5339 VILLAGE MARKET WESLEY CHAPEL FL 33543

## FILED Apr 21 1997 8:00am Secretary of State



03/01/97

(813)973-1318

								07/20/1995 05/1				Date of Last /14/1996	ate of Last Report 14/1996	
2. Principal P	face of Busin	ess	h	iling Address				4	FEI Num					Applied For
Suite, Apt.	# 010		26	1. A.I. 6					NOI /	APPLICAB	LE			Vot Applicat
2			27	le, Apl. #, etc.		_		5	. Certifica	te of Status E	Desired	X		Additional Required
City & State	e 		28 City	y & State				6		Campaign F nd Contributi	-			May Be to Fees
Zip	]	Country	Zip		Cour	ntry		8	. This con	oration has	liability fo	r intangib	le tax under	s. 199.032,
4		25	29		30				Florida S			Yes		
		and Address of Curr	ent Registere	d Agent		- 1	<del></del>	10	, Name a	nd Address	of New P	legistered	l Agent	
	LLEY, AND				Į.	81	Name							
100 S ASHLEY DR SUITE 1190			1	82 Street Addr			dress (P.O. Box Number is Not Acceptable)							
			ŀ				A service (Fig. 200 Helline) is Not Novephole							
TAME	PA FL 3360	2			ĺ	83								
					}	84	City			·····	<del></del>		lec l Zie	Code
					-	` }	•					FI	_ 1 1 1	
Office of re	egisterea agi	ons of Sections 607.0 ant, or both, in the Sta h, and accept the obl	te of Florida S	iuch change was a	authorized	i by	the corpo	corporation's	on submits board of o	this stateme irectors. I he	nt for the reby acc	purpose o ept the ap	of changing pointment a	its registere s registered
SIGNATURE	Signature, typed	or printed name of registered	agent and tille if app	licable. (NOT	l : Registered	Ager	nt signature n	raquired whe	n reinstating)	······································		DATE		
12.		OFFICERS A	ND DIRECTOR		13.					IS/CHANGES		ICERS AN	ID DIRECTO	RS IN 12
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NAME					62 NAN	ИE	ſ						•	
STREET ADDRESS							DDRESS }							
CITY-ST-ZIP					64 00)	Y - ST -	- 71P							
14. I do hereb	y certify that	the Information suppli	ed with this fili	ng does not qualif	y for the e	xen	nption sta	ated in Se	ection 119.	07(3)(i), Flori	da Statuti	es. I furthe	er certify that	I the
information I am an off appears in	n Indicated of ficer or direct n Block 12 or	the Information suppling this annual report of or of the corporation Block 13 if changed,	supplemental or the receiver or on an attach	annual report is to or trustee empow ment with an add	iue and ac ered to ex Iress.	cour (cou	ate and ti to this rep	that my si port as re	ignature st equired by	nall have the Chapter 607	same leg ', Florida	al effect a Statutes; a	s if made ur and that my	nder oath; th name

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