

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000073673 (2)**

1. Corporation Name

CHAD'S WORLD, INC.



Principal Place of Business

**2301 TORTUGA WAY
VALRICO FL 33594**

Mailing Address

**2301 TORTUGA WAY
VALRICO FL 33594**

3. Date Incorporated or Qualified
09/22/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

21 **4334 Bell Shoals Rd**

22 **Village Center**

23 **Valrico, FL**

24 **33594**

2a. Mailing Address

26 **2301 Tortuga Way**

27 Suite, Apt. #, etc.

28 **Valrico, FL**

29 **33594**

30 **Valrico, FL**

4. FEI Number

59-3340359

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

**DENMON, RICHARD
CARLTON FIELDS, ONE HARBOUR PLACE
5TH FLOOR
TAMPA FL 33802**

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature (Typed or Printed Name of Signer, Agent and the Corporation)

Signature (Typed or Printed Name of Signer, Agent and the Corporation)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BROWN, KENNETH N JR	
STREET ADDRESS	2301 TORTUGA WAY	
CITY - ST - ZIP	VALRICO FL 33594	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BROWN, DIANE N	
STREET ADDRESS	2301 TORTUGA WAY	
CITY - ST - ZIP	VALRICO FL 33594	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PRESTRIDGE, CHAD A	
STREET ADDRESS	2301 TORTUGA WAY	
CITY - ST - ZIP	VALRICO FL 33594	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

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*****225.00**

06-15-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in Book 12 or Book 13 if changed, or on an attachment with an address

SIGNATURE: **Chad Prestridge - CHAD PRESTRIDGE** Date: **5/10/96** Office Phone: **813-661-1933**

CR2E034 (12/95)