

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

FILED
Feb 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000079079**
1. Corporation Name
Chet & Mike's Shell Station, INC.

Principal Place of Business Mailing Address
**1140 MASON AVENUE
DAYTONA BEACH, FLORIDA 32117**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10-10-95	3a. Date of Last Report 5-96
21. State, Apt. #, etc.	22. City & State	23. Zip	24. Country	4. FEI Number 59-3352305	Applied For Not Applicable
25. Suite, Apt. #, etc.	26. City & State	27. Zip	28. Country	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
29. Suite, Apt. #, etc.	30. City & State	31. Zip	32. Country	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**Michael D. LAGANA
1140 MASON AVE.
DAYTONA BEACH, FL. 32117**

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	FL

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: **Michael D. LAGANA, Michael D. LAGANA, V.P.** DATE: **2-17-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11. TITLE	12. NAME
CHAIRMAN	NANCY J. LAGANA		
24 SAND CREEKS DR.		13. STREET ADDRESS	14. CITY-ST-ZIP
PALM COAST, FL. 32137			
TITLE	NAME	21. TITLE	22. NAME
LORRAINE LAGANA, P.			
500 JIMMY ANN DRIVE #511		23. STREET ADDRESS	24. CITY-ST-ZIP
DAYTONA BEACH, FL. 32114			
TITLE	NAME	31. TITLE	32. NAME
CHESTER LAGANA VP			
8 RIPPLE PL.		33. STREET ADDRESS	34. CITY-ST-ZIP
PALM COAST, FL. 32164			
TITLE	NAME	41. TITLE	42. NAME
MICHAEL LAGANA-VP			
5 RIPPLING PL.		43. STREET ADDRESS	44. CITY-ST-ZIP
PALM COAST, FL. 32164			
TITLE	NAME	51. TITLE	52. NAME
53. STREET ADDRESS	54. CITY-ST-ZIP	61. TITLE	62. NAME
63. STREET ADDRESS	64. CITY-ST-ZIP		

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

SIGNATURE: **Nancy J. LAGANA** DATE: **2-15-97** DAYTIME PHONE: **904-446-1097**

CR2E034 (9/96)

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