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May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000002747 (9)

1. Corporation Name

KACHINA FAMILY CORPORATION

Principal Place of Business

11995 SOUTH INDIAN RIVER DRIVE
JENSEN BEACH FL 34957

Mailing Address

P.O. BOX 751
JENSEN BEACH FL 34958-0751



2. Principal Place of Business

21 1848 NE RIDGE AVE

Suite, Apt. #, etc.

22

City & State

23 JENSEN BEACH, FL

Zip

24 34957

Country

25 MARTIN

26. Mailing Address

26 Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

01/09/1996

3a. Date of Last Report

N/A

4. FEI Number

APPLIED FOR

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

CHAMBERS, BRIAN
1848 N.E. RIDGE AVE.
JENSEN BEACH FL 34957

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 607.0402 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

Brian Chambers
Signature of registered agent and title if applicable

BRIAN CHAMBERS, PRES.

(NOTE: Registered Agent signature required when reinstating)

04/24/97
DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
CHAMBERS, BRIAN
STREET ADDRESS 11995 SOUTH INDIAN RIVER DRIVE
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ DELETE

NAME VD
CHAMBERS, KELSEY
STREET ADDRESS 11995 SOUTH INDIAN RIVER DRIVE
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ DELETE

NAME STD
CHAMBERS, DEVIN
STREET ADDRESS 11995 SOUTH INDIAN RIVER DRIVE
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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***165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 *Brian Chambers* Brian Chambers, PRES. 04/24/97 5:11:11 PM

CR2E034 (9/96)