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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000005854 (0)

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

CHIDESTER/JOHNSTONE GROUP, INC.

Principal Place of Business

Mailing Address

FILED Mar 05 1998 8:00am Secretary of State



3001 WEWST CHAPIN AVENUE TAMPA FL 33611		3001 WEWST CHAPIN AVENUE TAMPA FL 33611		DO NOT WRITE	IN THIS SPACE		
					3. Date incorporated or Qualified 01/18/1996	THIS STRUCT	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	· · ·	Applied For
21 280	& BAYRUINTE CIR.	26 2808 BAYPE	DINTE C	1R.	59-3356633		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	, ,	75 Additional be Required
City & Stat	iPA, FL	City & State 28 TAMPA, FL			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 3건		zip 33611 30	Country	·	8. This corporation owes or has par Personal Property Tax due June		ar Intangible
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	lstered Agent	
CH	(ILDESTER, KAY A		61 Name	e			
	01 West Chapin Avenue -		82 Stree	t Addres	s (P.O. Box Number is Not Acceptab	e)	
TA	MPA FL 33611	12808		08	BAY POINTE CIR	CLE	
			83				
İ			84 City_	AM	PA	FL 85	Zip Code 33611
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-name	d corner	ation cultimite this statement for the n	irnore of changi	no ite registered
office or r	egistered agent, or both, in the State of polamiliar with, and agreet the obligation	Florida. Such change was autl one of Section 607,0505. Florid	horized by the co ia Statutes	rporation	n's board of directors. I hereby accep	t the appointmen	nt as registered
SIGNATURE	THUIT CITE		a ciaidico.			3/1/98	〈
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: R	egistered Agent signatu	re required	when reinstating)	DATE	
12.	OFFICERS AND I		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	D.	☐ DELETE	1.1 TITLE			Cha	nge 🔲 Addition
NAME	CHIDESTER, KAY A		1.2 NAME				
STREET ADDRESS	- 3001 WEST CHAPIN AVE.		1.3 STREET ADDRESS	280	OB BAYPOINTE CIRC	LE	
CITY-ST-ZIP	TAMPA FL 33611		1.4 CiTY-ST-ZIP				
TITLE	D	☐ DELETE	2.1 TIFLE			Cha	nge Addition
NAME	CHIDESTER, DAVID L		2.2 NAME	1	•		
STREET ADDRESS	3001-WEST-CHAPIN-AVE		2.3 STREET ADDRESS	280	B BAY POINTE CI	LCLE	
CITY-ST-ZIP	TAMPA FL 33611		2. 4 CITY - ST - ZIP				
TITLE	D	☐ DELETE	3.1 TITLE			☐ Char	nge Addition
NAME	JOHNSTONE, CHRIS E		3.2 NAME				
STREET ADDRESS	1093 MUIRFIELD COURT	•	3.3 STREET ADDRESS				
CITY-ST-ZIP	TARPON SPRINGS FL 33589	~~·	3.4. CITY - ST - ZIP				
TITLE	0	☐ DELETE	4.1 TITLE			☐ Char	nge 🔲 Addition
NAME	JOHNSTONE, RAYMONDE		4. 2 NAME				
STREET ADDRESS	1093 MUIRFIELD COURT		4.3 STREET ADDRESS				
CITY-ST-ZIP	TARPON SPRINGS FL 33589		4.4 CITY - ST- ZIP	1			
TITLE		☐ DELETE	5.1 TITLE			☐ Char	nge 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS	1			
CITY-ST-ZIP		C priete	5.4 CITY-ST-ZIP	<u> </u>			
TITLE		☐ DELETE	6.1 TITLE			L Char	rge
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP		the following and the first of	6.4 CiTY - ST - ZIP	1	440.05/00/15	<u></u>	
officer or o	ertify that the information supplied with on this annual report or supplemental a director of the corporation or the receive or Block 13 if changed, or on an attach	nnual report is true and accura er or trustee empowered to exe	te and that my si.	anature i	chall have the came lenal offert so if i	nada undar aath	that lamen