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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000020521 (6)

FILED May 12 1998 8:00am Secretary of State

CHITED DESIGN ASSOCIATES, INC.							(MONAGE IN 1842 CINE SALE CON CONTRACTOR CON CONTRACTOR CONTRACTO			
Principal Place of Business			Mailing	Mailing Address						
690 BALMORAL ROAD WINTER PARK FL 32789				880 BALMORAL ROAD WINTER PARK FL 32789						
								DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified		
2. Principal f	Place of Busin	2n Mailir	2a. Mailing Address				03/01/1996 4. FEI Number Applied For			
21			├ ──¬	26				Fa. Stal Bath		
Suite, Apt	. #, etc			Suite, Apt. #, etc.						
22			27	27				5. Certificate of Status Desired Fee Regulred		
City & Sta	to			City & State			 	6. Election Campaign Financing \$5.00 May Be		
23			28	28				Trust Fund Contribution Added to Fees		
Zip		Country	Zip "	Zip Cou				8. This corporation owes or has paid the current year Intangible		
24	[25]		29			~; <u>-</u> ,		Personal Property Tax due June 30. Yes No		
			urrent Registered	Agent		41		10. Name and Address of New Registered Agent		
	EVENS, MIC				8	וי וי	ame			
680 BALMORAL ROAD					6:	2 St	reet Addre	ddress (P.O. Box Number is Not Acceptable)		
WINTER PARK FL 32789					ļ.,					
		83			·					
					8-	4 C	ty	85 Zip Code		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the						ua-na	med corpo	ration submits this statement for the purpose of changing its resistand.		
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 registr	red agent and title it applica	ble (NOTE:	Registered A	gent sig	nature required	d when reinstating) DATE		
12.		OFFICE	S AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P			DELETE	1.1 TITLE			Change Addition		
NAME		8, MICHAEL F			1.2 NAME	į				
STREET ADDRESS	1	MORAL ROAD			1.3 STRE	ET ADDI	RESS			
CITY-ST-ZIP	WINTER	PARK FL 32789		TT	1.4 CiTY-					
TITLE				☐ DELETE	2.1 TITLE			☐ Change ☐ Addition		
NAME					2 2 NAME					
STREET ADDRESS					2.3 STREE		- 1			
CITY-ST-ZIP TITLE				DELETE	2. 4 CITY 3.1 TITLE	_	· · · · · · · · · · · · · · · · · · ·	Change Addition		
NAME				_ been	3.1 TITLE 3.2 NAME			L.J Change L.J Addition		
STREET ADDRESS					3.3 STREE		Eec	i		
CITY-ST-ZIP					3.4 CITY					
TITLE				DELETE	4.1 TITLE			Change Addition		
NAME					4. 2 NAMI					
STREET ADDRESS					4.3 STREE	T ADDR	ESS			
CITY-ST-ZIP					4.4 CITY-	ST-ZIP				
TITLE				DELETE	5.1 TITLE			☐ Change ☐ Addition		
NAME					5.2 NAME					
STREET ADDRESS					5.3 STREE	T ADDR	ESS			
CITY-ST-ZIP					5.4 CITY-	ST-ZIP				
TIFLE				DELETE	6.1 TITLE			Change Addition		
NAME					6.2 NAME					
STREET ADDRESS					6.3 STREE	T ADDR	ESS			
CITY-ST-ZIP					64 CITY-	ST-ZIP				

th this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and ual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an infer trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in himent with an address. I hereby certify that the information sup-indicated on this annual report or supp-officer or director of the corporation of Block 12 or Block 13 if change in of

4.11.90