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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

125 W. ROMANA STREET



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000038777 (4)

CHASE STREET PROPERTY, INC.

Mailing Address

125 W. ROMANA STREET SUITE 222 FILED Feb 27 1998 8:00am Secretary of State



PENSACOLA F	L 32501	PENSACOLA FL 32501		DO NOT WRITE IN THIS	SPACE
US		US		3. Date Incorporated or Qualified	
				05/01/1996	
	aco of Business	2a, Mailing Address	بلدے مدمد	4. FEI Number	Applied For
21 175	W. Komuna St.		nana st.	59-3375344	Not Applicable
Suite, Apt.	<u>e 224</u>	Suite Apt 1, etc.	4	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	acola, FL	City & State  28 Pensacola	<u> </u>	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
ZiD	Country	Zip Zip	Country	This corporation owes or has paid the co	<del></del>
24 3250	25 US	29 3250/ 30	~ <i>1 • ^</i>	Personal Property Tax due June 30.	Yes X No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	1 Agent
LOZIER, DANIEL R 81 Name / szien Draiel P					
125 WEST ROMANA STREET STE 222  82 Street Address (P.O. Bornhumber is Not Acceptable)					
PENSACULA FL 32501 125 W. KOMANA ST.					
			83 50	rite 224	
			84 City ))	ensacola FI	85 Zio Code
11 Pursuant I	a the provisions of Sections 607 0503	and 607 1508 Florida Statutos	the above-named o	corporation submits this statement for the purpose	of changing its registered
11. Pursuant to the provisions of Sections 607.0702 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 Systech Florida, such plange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the deligitions of Section 607.050. Torida Statutes.					
SIGNATURE Signature: typicd or printed name of legistered injurit and tallor applicable (NOTE: R) giftered Agent signature required when reinstating)  DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	CHARLO CHARLEO A N	☐ DELETE	1.1 TITLE		Change Addition
NAME	EMLING, CHARLES A III 200 S TARRAGONA ST.		1.2 NAME		
STREET ADDRESS	PENSACOLA FL 32501		1.3 STREET ADDRESS		•
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY+ST-ZIP 2.1 TITLE		Change Addition
NAME	BULLOCK, JOHN H KEITH	_ been	2.2 NAME		Chouge Chyogges
STREET ADDRESS	200 S TARRAGONA ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL 32501		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY+S1-ZIP			3 4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
TITLE NAME		□ bereie	5.1 111LE 5.2 NAME		The change The wontiger
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		•
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		-
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		·
44					

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 Informatio indicated on this annual roport or suppliencental arrival\* 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

Alla lla

J. H. Kerth Bullock

2/23/98

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