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

**CORPORATION ANNUAL REPORT** 

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000082788 (6) DOCUMENT #

1. Corporation Name

CHRISTINA STORAGE, INC. Principal Place of Business Mailing Address 1905 SOUTH FLORIDA AVE 1905 SOUTH FLORIDA AVE LAKELAND FL 32803 LAKELAND FL 32803 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/07/1996 Principal Place of Business Mailing Address 4. FEI Number Applied For 59-3405813 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6, Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 <del>CHRITTON: CHARLES P</del> <del>5000 **ČO**UTH FLORIDA AVENU</del>E 82 LAKELAND FL 00007 83 84 LAKELAND 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 applications of, Section 607.0505, Florida Statutes. 4/27, R.GUERRY JONES SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE TITLE Change Addition 1.1 TITLE HARPER, ROBERT F IV NAME 12 NAME 5742 COVEVIEW DRIVE STREET ADDRESS <del>2010 LAKELAND HILLS DLY</del>D 1.3 STREET ADDRESS AKELAND FL-83805 CITY-ST-7IP 1.4 CITY-ST-ZIP TITLE DELETE Change Addition 21 TITLE NAME JONES, R GUERRYY 22 NAME STREET ADDRESS 1905 S FLORIDA AVE 2.3 STREET ADDRESS - INCLEAND FL 33803 2.4 CITY - ST - ZIP DELETÉ TITLE 3.1 TITLE ☐ Change Addition PETTERSON, JOHN E 3.2 NAME 71 SHADOW LANE STREET ADDRESS 3.3 STREET ADDRESS LAKELAND FL 33813 CITY-ST-ZIP 3.4. CITY - ST-ZIP □ DELETE TITLE Change Addition 4.1 THILE STEPHEN H. HAMIC NAME 4. 2 NAME 1905 S. FLORIDA AVE. STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP LAKELAND DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE Change NAME 6.2 NAME

14. Thereby 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.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

**FILED** 

May 05 1998 8:00am

Secretary of State