

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

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May 13 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 # P96000089657 (6)

1. Corporation Name:
MR. CHARTER, INC.

Principal Place of Business
405 NORTHEAST 7TH STREET
GAINESVILLE FL 32601

Mailing Address
405 NORTHEAST 7TH STREET
GAINESVILLE FL 32601-5545



2. Principal Place of Business
21 405 NE 7th St
Suite, Apt. #, etc.
22 City & State
23 Gainesville FL
Zip Country
24 32601 25 Alachua
2a. Mailing Address
26 405 NE 7th St
Suite, Apt. #, etc.
27 City & State
28 Gainesville FL
Zip Country
29 32601 30 Alachua

3. Date Incorporated or Qualified
10/31/1996
3a. Date of Last Report
4. FEI Number
59-340-7236
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
AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name
Eric Manin
82 Street Address (P.O. Box Number is Not Acceptable)
405 NE 7th St
83
84 City
Gainesville FL
85 Zip Code
32601

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 *Eric Manin* DATE 4/29/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE PTD
NAME SEMONES, MARGARET
STREET ADDRESS 405 NORTHEAST 7TH STREET
CITY-ST-ZIP GAINESVILLE FL 32601
TITLE VD
NAME UNGER, KENNETH
STREET ADDRESS 405 NORTHEAST 7TH STREET
CITY-ST-ZIP GAINESVILLE FL 32601
TITLE SD
NAME MANIN, ERIC
STREET ADDRESS 405 NORTHEAST 7TH STREET
CITY-ST-ZIP GAINESVILLE FL 32601
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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

14. I do 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 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 or changed or on an attachment with an address.

SIGNATURE: *Eric Manin* SIGNATURE REQUIRED
4/29/97 352-370-8662
Date Daytime Phone #

CR2E034 (9/96)