2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P97000007043 **DOCUMENT #**

1. Entity Name

FILED Apr 08, 2003 8:00 am Secretary of State

04-08-2003 90102 032 ***150.00

CHARTWELL PROPERTY DEVELOPMENT AND INVESTMENT IN C.										
Principal Place of Business 3800 S. TAMIAMI TRAIL SARASOTA FL 34239 US			Mailing Address P.O. BOX 6233 SARASOTA FL 34278 US							
2. Principal F	Place of Busir	ness	3. Mailing Address	3. Mailing Address				# 	jei (14) (44)	
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State			4. F	El Number 65-0781769		oplied For ot Applicable	
Zip		Country	Zip	Cour	ntry	5. (Certificate of Status Desired	\$8.75 Add	ditional	
****	6 Name	and Address of Current	Registered Agent	L	7. Name and Address of New Registered Agent					
TURNER, J	or Signature of Control of Contro	Hogisterou Agem		Name						
200 SOUTH ORANGE AVENUE					Street Address (P.O. Box Number is Not Acceptable)					
SARASOTA	4 FL 34236									
- A - 19 - 19 - 19 - 19 - 19 - 19 - 19 - 19	•	- 15 			City		FL	Zip Cod	е	
	named entit tions of regis		or the purpose of changing its	register	ed office or regi	stered ag	ent, or both, in the State of Florida. ‡ am	familiar with,	and accept	
SIGNATURE	Signature, typed	or printed name of registered agent	and title if applicable. (NOTE	E: Registere	ed Agent signature rec	quired when re	instating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State							9. Election Campaign Financing Trust Fund Contribution. [10 May Be d to Fees	
10.		. OFFICERS AND	DIRECTORS	11.		AC	DITIONS/CHANGES TO OFFICERS AN	DIRECTOR	\$ IN 11	
TITLE	P SPARROW, BLAIR 131 MAIN STREET OSPREY FL 34229		☐ Delete					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SPARROW, HELEN			NAM STRI	TITLE NAME STREET ADDRESS CITY-ST-ZIP		_	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NA STI			I			☐ Change	☐ Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					☐ Change	Addition	
TITLE			☐ Delete	TITL				☐ Change	☐ Addition	

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

4-1-03