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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000026930 (2)

CHILTON CONSTRUCTION, INC.	· /		
Principal Place of Business Mailing Address		I MANUAL IN THE INTERPRETATION OF THE INTERP	ISE SO DITOU OUT ON THE SOLET ON IS DANGED.
1720 N.W. 38TH AVENUE 1720 N.W. 38TH AVEN	NE	:	
#45B #45B		DO NOT WRITE IN TH	IC CDACE
OGALA FL 34482 OCALA FL 34482		3. Date Incorporated or Qualified	15 SPACE
		03/20/1997	
2. Principal Place of Business . 2a. Mailing Address		4. FEI Number	Applied For
21 7390 NW 45th Lane 28 7390 Nu	45th Lane	59-3440088	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		_	\$8.75 Additional
27		5. Certificate of Status Desired	Fee Required
City & State City & State		6. Election Campaign Financing	\$5.00 May Be
23 Ocula +1 28 Ocula 5	<i>?</i> \	Trust Fund Contribution	Added to Fees
Zip Country Zip	Country	8. This corporation owes or has paid the	
24 34482 25 20 34482	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent	B1 Name	10. Name and Address of New Registere	ed Agent
PAYNTER, LAURA	81 Name		
1720 N.W. 38TH AVENUE 82 Street Addr		dress (P.O. Box Number is Not Acceptable)	
		NW 45th Lane	<u></u>
OCALA FL 34482	83		
	84 City		85 Zip Code
		cala F	L 3 <i>44.</i> 82.
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Sta office or registered agent, or both, in the State of Florida. Such change we agent. I am familiar with, and accept the obligations of, Section 607.0505, 	itutes, the above-named cor as authorized by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered
agent. I am familiar with, and accept the obligations of, Section 607.0505,	Florida Statutes.	and some or encourse, the beginning a	ppointino do registeres
SIGNATURE			
Signature, typed or printed name of registered agent and little if applicable (fig. OFFICERS AND DIRECTORS	NOTE: Registered Agent signature requ		
TITLE D DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME PAYNTER, LAURA	1.2 NAME		C overige C vecimen
STREET ADDRESS 1720 N.W. 38TH AVENUE	1.3 STREET ADDRESS	20x 1/4) NETHI 0	
ABILE MI ALLEA	1.3 STREET ADDRESS V	398 NW 45th Lane Ocula 41 34482	
CITY-ST-ZIP UCALA FL 34482 TITLE DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Deala +1 34485	Change Addition
NAME	2.2 NAME		
STREET ADDRESS	2.3 STREET ADDRESS		
CITY-ST-ZIP			
TITLE DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	·····	☐ Change ☐ Addition
NAME	3.2 NAME		creation requirem
STREET ADDRESS	3.3 STREET ADDRESS		
CITY-ST-ZIP	34. CITY-ST-ZIP		
TITLE DELETE	4.1 TITLE		Change Addition
NAME	4.2 NAME	•	
STREET ADDRESS	4.3 STREET ADORESS		Į
CITY-ST-ZIP	4.4 CITY-ST-ZIP		ļ
TITLE DELETE	51 TITLE		Change Addition
NAME	5.2 NAME		
STREET ADDRESS	5.3 STREET ADDRESS		
CITY-ST-ZIP	5.4 CITY-ST-ZIP		†
TITLE DELETE	6.1 TITLE		Change Addition
_ =	=		

14. 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 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

CICMATURE.

STREET ADDRESS

CITY-ST-ZIP

Painte Lain

352-1081-11001

FILED

May 07 1998 8:00am

Secretary of State