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

**PROFIT** CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P97000049717 (6)

C.H.W. ENTERPRISES, INC.

**FILED** May 04 1998 8:00am Secretary of State



Brigginal Place	e of Queinone	Mailing Address				
703 FRANKLIN STREET 703 FRANKLIN STREET CLEARWATER FL 33756 CLEARWATER FL 33756						
GLEARWATER PL 33730		OLEANWAITH PL 3	3/30		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					06/04/1997	
2. Principal P	Place of Business	2a. Mailing Address	3		4. FEI Number Applied For	
21		26			59-34-54098 Not Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional	
22		27			Fee Required	
City & Stat	е	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Cou	ntry	G. This corporation area of the paid the content year intelligible	
24	25	29	30		Personal Property Tax due June 30. Yes No	
	g. Name and Address of Currer	nt Registered Agent		<b>54</b> 1	10. Name and Address of New Registered Agent	
BA	skin, Hamden H III			81 1	Name	
518 N. FT. HARRISON AVE.				82 Street Address (P.O. Box Number is Not Acceptable)		
CL	EARWATER FL 34815		<u> </u>			
				B3		
			i	84 C	City 85 Zip Code	
					FL 15 25 5000	
11. Pursuant to the provisions of Sections 697,0502 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						
Signature typed or printed name of registroring agent and title it applicable (NOTE Registered Agent signature required when reinstalling) DATE						
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELET	E 1.1 T(1	LE	☐ Change ☐ Addition	
NAME	WILLIAMSON, GORDON "FLA	ISH" C	1.2 NA	ME		
STREET ADDRESS	703 FRANKLIN STREET		1.3 ST	REET ADE	ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 33756			IY-ST-Z		
TITLE	D	☐ DĒLET	E 2110	LE	Change Addition	
NAME	HENDERSON, D. EDWARD		2.2 NA	ME		
STREET ADDRESS	1029 NOKOMIS ST.		2357	REET ADD	ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 33755			ITY-ST-Z	ıt - zip	
TITLE	D	☐ DELET	Έ 31 TΠ	LF	☐ Change ☐ Addition	
NAME	CAREY, DAVID J		3.2 NA	ME	]	
STREET ADDRESS	1180 PORT WAY		3.3 \$1	REET ADE	ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 33755			1Y-\$1-Z		
TITLE	D	DELET	E 4.1 311	LE	☐ Change ☐ Addition	
NAME	HENDERSON, F. SCOTT		4. 2 N	AME		
STREET ADDRESS	675 GULFVIEW BLVD: 6:241	094	4.3 \$1	REET ADO	ADDRESS 1755 HARBOR DRIVE	
CITY-ST-ZIP	CLEARWATER FL 34639		4.4 01	Y-ST-Z	ADDRESS 1755 HARBOR DRIVE LIP CLETTRWATER, FL 337.55	
TITLE		DELET	E 5.1 Til	ï.E	☐ Change ☐ Addition	
HAME			5.2 NA	ME		
STREET ADDRESS			5.3 <b>\$</b> 1	REET ADE	ADDRESS	
CITY-ST-ZIP			5.4 C6	ry-st-zi	r-ZIP	
TITLE		☐ DELET			Change Addition	
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET ADD	ADDRESS	
CITY-ST-ZIP				Y-ST-Z		
	certify that the information supplied w	ith this him does not qu			tion stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	

to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: