## 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 # P97000069665 (2)

CHAMBERLAIN CONSULTING GROUP, INC.

Principal Place of Business Mailing Address 10265 GANDY BLVD N #1312 10265 GANDY BLVD N #1312 ST PETERSBURG FL 33702 ST PETERSBURG FL 33702 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/11/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 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 Personal Property Tax due June 30. 25 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CHAMBERLAIN, CATHI 10265 GANDY BLVD N #1312 Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33702 83 84 Zip Code 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 Signature, typed or printed name of registered agent and tele if applicable (NOTE Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE CHAMBERLAIN, CATHI NAME 1.2 NAME 10265 GANDY BLVD N #1312 STREET ADDRESS 1.3 STREET ADDRESS **ST PETERSBURG FL 33702** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETÉ Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE ☐ Addition TITLE 41 TITLE

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 is 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.

4 2 NAME

5.1 TITLE 5.2 NAME

6 1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

CIGNATURE.

NAME

TITLE

TITLE

STREET ADDRESS

STREET ADORESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Cattle Chamberl

4/27/98

Change

Change

Addition

Addition

FILED

May 06 1998 8:00am

Secretary of State