

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

FILED
Mar 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000069753 (6)**

1. Corporation Name
C & A RARITIES, INC.



Principal Place of Business 3824 S.E. DIXIE HIGHWAY STUART FL 34997	Mailing Address 3824 S.E. DIXIE HIGHWAY STUART FL 34997
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 789 S. Federal Hwy Suite, Apt. #, etc. Suite 306 City & State Stuart, FL Zip 34994 Country		2a. Mailing Address 26 P.O. Box 3000 Suite, Apt. #, etc. City & State Stuart, FL Zip 34995 Country		3. Date Incorporated or Qualified 08/11/1997
23 34994		27 34995		4. FEI Number 65-0771929
24 34994		28 34995		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fees Required
25		29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
26		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent CHRISTENSON, LINDA 3824 S.E. DIXIE HIGHWAY STUART FL 34997		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 789 S. Federal Hwy 83 Suite 306 84 City Stuart FL 85 Zip Code 34994	
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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 Linda F. Christenson Linda F. Christenson 3/24/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CHRISTENSON, LINDA		1.2 NAME	
STREET ADDRESS 3824 S.E. DIXIE HIGHWAY		1.3 STREET ADDRESS 789 S. Federal Hwy, Suite 306	
CITY-ST-ZIP STUART FL 34997		1.4 CITY-ST-ZIP Stuart, FL 34994	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE Jaci Schlemmer (Sec/Treas)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS 789 S. Federal Hwy Suite 306	
CITY-ST-ZIP		2.4 CITY-ST-ZIP Stuart, FL 34994	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME Zackary Martin	
STREET ADDRESS		3.3 STREET ADDRESS 789 S. Federal Hwy Suite 306	
CITY-ST-ZIP		3.4 CITY-ST-ZIP Stuart, FL 34994	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 if changed, or on an attachment with an address.

SIGNATURE: Linda F. Christenson Linda Christenson 3/24/98 561-287-3100

CR2E034 (10/97)