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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000017406

1. Corporation Name

DEAN CHASE, INC.

Principal Place of Business

Mailing Address

## **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90190 025 \*\*\*150.00



1 EAST CHURCH STREET RLANDO FL 32801		71 EAST CHURCH STREET ORLANDO FL 32801			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 02/19/1998	_	
2. Principal Place of Business		2a	. Mailing Address			4. FEI Number Applied For		
		26				59-3504968 Applied For Not Applied For		
Suite,	Apt. #, etc.	27	Suite, Apt. #, etc.	_		5. Certificate of Status Desired		
City &	State	28	City & State	-	м,,,	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country 25	29	Zip Co	untry	···	8. This corporation owes the current year Intangible Personal Property Tax. Yes No		
<del></del>	9. Name and Address of Curre					10. Name and Address of New Registered Agent		
				81	, · · · ·			
3	869 N. NEW YORK AVE., 3RD FLO	OR			Street Address (P.O. Box Number is Not Acceptable)			
٧	NINTER PARK FL 32789			83				
				84	City	FL 85 Zip Code		
						the state this the season of changing its registered		

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.

J	•		
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	gistered Agent signature re	outred when reinstating) DATE
	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D DELETE	1.1 TITLE	Change Addition
TITLE	_		
NAME	JUNE, ROHLAND A II	1.2 NAME	
STREET ADDRESS	71 EAST CHURCH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32801	1.4 CITY-ST-ZIP	
TITLE	D DELETE	2.1 TITLE	· Change : Addition
NAME	HOLSTON, ROBERT	2.2 NAME	gar eg
STREET ADDRESS	71 EAST CHURCH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32801	2.4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	` Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 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
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Control of the state of the sta

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, with all other like empowered.

SIGNATURE:

