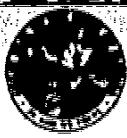


**FLORIDA CORPORATION
ANNUAL REPORT**

1995



**FLORIDA DEPARTMENT OF STATE
Sandra B. Martin
Secretary of State
DIVISION OF CORPORATIONS**

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAY - 1 PM 1:56

DOCUMENT # S20484

(9)

1. Corporation Name

CHARLES WORTHINGTON, INC.

Physical Address:

**3820 NORTH 65TH AVE
HOLLYWOOD FL 33024**

Mailbox Address:

**3820 NORTH 65TH AVE
HOLLYWOOD FL 33024**

DRAFT - NOT FOR PUBLIC RELEASE

3. Date of Incorporation / Last Date of Previous Report

12/20/1990

04/29/1994

4. Filing Status Applied For Not Applicable

65-0232663

5. Certificate of Formation \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Other Corporate Tax Liability No Yes No Yes

9. Name and Address of Current Registered Agent

**WORTHINGTON, CHARLES
3820 NORTH 65TH AVE
HOLLYWOOD FL 33024**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City **FL** 85. Zip Code

10. Name and Address of New Registered Agent

11. I, the undersigned, do solemnly swear or affirm, under the penalties of perjury, that the information contained in this statement is true and correct to the best of my knowledge and belief, on the date of filing this report, and that I will keep the obligation set forth in Chapter 579.17, Florida Statutes.

I, the undersigned,

12. OFFICERS AND OTHER DIRECTORS

13. ADDITIONAL CHANGES IN OFFICERS AND DIRECTORS

DP
**WORTHINGTON, CHARLES
3820 NORTH 65TH AVE
HOLLYWOOD FL**

1. Name	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. Street Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition

DST
**WORTHINGTON, SUSAN D.
3820 NORTH 65TH AVE
HOLLYWOOD FL**

1. Name	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. Street Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition

NAM
**3820 NORTH 65TH AVE
HOLLYWOOD FL**

1. Name	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. Street Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition

NAM
**3820 NORTH 65TH AVE
HOLLYWOOD FL**

1. Name	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. Street Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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3. Street Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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2. Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. Street Address	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. City, State, Zip	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the documents supplied with this filing are voluntarily furnished and given in good faith for the purpose stated in Article 14 of the Florida Statutes. I further certify that the information indicated in this annual report is supplemental annual report information and that the corporation shall file the same legal office made under oath or affirmation of officer of the corporation or the receiver or trustee empowered to execute the reports as required by Chapter 579, Florida Statutes, and that the same shall be filed in the Clerk's Office of the County in which the corporation is incorporated with an address:

SIGNATURE: CWS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-95 (box) 792-1220