FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 11:23

DOCUMENT # S35350 (5)

1. Corporation Name
CHARTERING CORPORATION OF AMERICA, INC.

Principal Place of Business	Mailing Address
8384 BAYMEADOWS RD STE 11 JACKSONVILLE FL 32256	8384 BAYMEADOWS RD STE 11 JACKSONVILLE FL 32256

3. Date Incorporated or Qualified: 02/14/1991
3a. Date of Last Report: 04/05/1994
4. FEI Number: 59-3061604 — Applied For / Not Applicable
5. Certificate of Status Desired — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199 Florida statutes — Yes / No

2. Principal Office Address / 2a. Mailing Address: Suite, Apt. #, etc.; City & State; Zip; Country

9. Name and Address of Current Registered Agent

MALDONADO, AUGUSTO
8384 BAYMEADOWS RD
STE 11
JACKSONVILLE FL 32256

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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

12. OFFICERS AND DIRECTORS

Field	
TITLE	P
NAME	MALDONADO, AUGUSTO
STREET ADDRESS	8384 BAYMEADOWS RD #11
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	VT
NAME	MALDONADO, VALERIE
STREET ADDRESS	8384 BAYMEADOWS RD #11
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	~~S~~
NAME	~~BRIDGES, CHUCK~~
STREET ADDRESS	~~8384 BAYMEADOWS RD #11~~
CITY-ST-ZIP	~~JACKSONVILLE FL~~

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 — Change / Addition

REMITTED BY MAY 1

14. I the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07, 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: Valerie Maldonado — 4/30/95 904/636-8313
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0020830 CP