

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **S92848** (8)

1. Corporation Name

**STERLING CHASE DEVELOPMENT, INC.**



Principal Place of Business

**3921 S. NOVA RD.  
PORT ORANGE FL 32127**

Mailing Address

**3921 S. NOVA RD.  
PORT ORANGE FL 32127**

3. Date Incorporated or Qualified  
**11/08/1991**

3a. Date of Last Report  
**05/10/1995**

2. Principal Place of Business

21 **952-B BIG TREE ROAD**

Suite, Apt. #, etc.

2a. Mailing Address

26 **P.O. BOX 4578**

Suite, Apt. #, etc.

4. FEI Number

**59-3096900**

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. 199.032,  
Florida Statutes ☒ Yes ☐ No

23 City & State

**SOUTH DAYTONA, FL**

27 City & State

**SOUTH DAYTONA, FL**

24 Zip

**32119**

25 Country

**USA**

29 Zip

**32121**

30 Country

**USA**

9. Name and Address of Current Registered Agent

**SLIGER, GUS A.  
3921 S. NOVA ROAD  
PORT ORANGE FL 32119**

10. Name and Address of New Registered Agent

81 Name  
**Bledsoe, James R.**

82 Street Address (P.O. Box Number is Not Acceptable)  
**952-B Big Tree Road**

83

84 City  
**South Daytona**

85 Zip Code  
**FL 32119**

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 607.0503, Florida Statutes.

SIGNATURE

*James R. Bledsoe* **James R. Bledsoe, President**

**3-6-96**

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
**DP  
SLIGER, GUS A.  
3921 S. NOVA RD.  
PORT ORANGE FL**

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
**DV  
BLEDSOE, JAMES R.  
3921 S. NOVA RD.  
PORT ORANGE FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

TITLE  
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CITY-STATE-ZIP

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CITY-STATE-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
**Director, President** ☒ Change ☐ Addition

1.2 NAME  
**Bledsoe, James R.**

1.3 STREET ADDRESS  
**952-B Big Tree Road**

1.4 CITY-STATE-ZIP  
**South Daytona, FL 32119**

2.1 TITLE  
**Director, VP, Secretary** ☐ Change ☒ Addition

2.2 NAME  
**Bledsoe, Lore L.**

2.3 STREET ADDRESS  
**952-B Big Tree Road**

2.4 CITY-STATE-ZIP  
**South Daytona, FL 32119**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *James R. Bledsoe* **James R. Bledsoe, President**

**3-6-96**

**904-761-6111**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

CR2E034 (12/95)