

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Suzanne R. MacMahon  
Secretary of State  
DIVISION OF CORPORATION

APPROVED  
AND  
FILED

MAY - 1 AM 5:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # V03595

(8)

1. Corporation Name:

CHAPTERS COFFEEHOUSE & CAFE INC.

Principal Place of Business

115 S ORANGE AVE  
ORLANDO FL 32801

Mailing Address

115 S ORANGE AVE  
ORLANDO FL 32801

2. Principal Place of Business

21 Street, Apt. #, etc.

28. Mailing Address

26

Street, Apt. #, etc.

22 City, State

27 City, & State

23 Zip

28 Zip

24 City, State

29 Zip

30 City, State

9. Name and Address of Current Registered Agent

CUMMINS, JAN S.  
916 GUERNSEY ST.  
ORLANDO FL 32804

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. Pursuant to the provisions of Sections 857.050 and 857.1508 Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent. In both 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 857.1508, Florida Statutes.

SIGNATURE

NAME  
STREET ADDRESS  
CITY, ST, ZIP

NAME  
STREET ADDRESS  
CITY, ST, ZIP

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME  
STREET ADDRESS  
CITY, ST, ZIP

11 NAME

12 NAME

13 OTHER ADDRESS

14 CITY, ST, ZIP

Change

Addition

NAME  
STREET ADDRESS  
CITY, ST, ZIP

15 NAME

16 NAME

17 OTHER ADDRESS

18 CITY, ST, ZIP

Change

Addition

NAME  
STREET ADDRESS  
CITY, ST, ZIP

19 NAME

20 NAME

21 OTHER ADDRESS

22 CITY, ST, ZIP

Change

Addition

NAME  
STREET ADDRESS  
CITY, ST, ZIP

23 NAME

24 NAME

25 OTHER ADDRESS

26 CITY, ST, ZIP

Change

Addition

NAME  
STREET ADDRESS  
CITY, ST, ZIP

27 NAME

28 NAME

29 OTHER ADDRESS

30 CITY, ST, ZIP

Change

Addition

NAME  
STREET ADDRESS  
CITY, ST, ZIP

31 NAME

32 NAME

33 OTHER ADDRESS

34 CITY, ST, ZIP

Change

Addition

NAME  
STREET ADDRESS  
CITY, ST, ZIP

35 NAME

36 NAME

37 OTHER ADDRESS

38 CITY, ST, ZIP

Change

Addition

NAME  
STREET ADDRESS  
CITY, ST, ZIP

39 NAME

40 NAME

41 OTHER ADDRESS

42 CITY, ST, ZIP

Change

Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 107-246-1516  
Date Printed