

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # V41904

(6)

1. Corporation Name

CHUCK HOWARTH & ASSOCIATES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -6 PM 4:35

Principal Place of Business

9385 N 56TH ST STE 201
TEMPLE TERRACE FL 33617
US

Mailing Address

9385 N 56TH ST. STE 201
TEMPLE TERRACE FL 33617
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/05/1992

3a. Date of Last Report

01/25/1994

4. FEI Number

59-3131039

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

2. Principal Place of Business

21

2a. Mailing Address

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GROSE, DOUGLAS L
112 SOUTH ARMENIA AVENUE
TAMPA FL 33609

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME HOWARTH, CHARLES W
STREET ADDRESS 8310 NACHEZ ST
CITY-ST-ZIP TAMPA FL

1.1 TITLE SAME
1.2 NAME SAME
1.3 STREET ADDRESS 18919 FAIRWOOD CT.
1.4 CITY-ST-ZIP TAMPA, FL. 33647

TITLE ST
NAME HOWARTH, ANN
STREET ADDRESS 8310 NACHEZ ST
CITY-ST-ZIP TAMPA FL

2.1 TITLE SAME
2.2 NAME SAME
2.3 STREET ADDRESS 18919 FAIRWOOD CT.
2.4 CITY-ST-ZIP TAMPA, FL. 33647

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or its 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:

CHARLES W. HOWARTH, Pres.

(Date)

2-1-95

(813) 989-0045