## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



## FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISCHILLES

BRADLEY R.

DOCUMENT # v51662

CHRISCHILLES & ASSOCIATES, INC.

## FILED Apr 29 1997 8:00am Secretary of State

Salin Apt. 8. etc.    Salin Apt. 8. etc.   Salin Ap	1279 BELLMONTE TE		SAME						
2. Malaring Address	JACKSONVILLE, FL	32207-3259							
2. Process   2. Malling Address   3. Malling Address   5. SAME   5. SAME   5. SAME   5. SAME   5. SAME   5. Certificate of Status Desired   58.76 Additional Free Required   58.76 Additional Free Required   58.76 Additional Free Required   5. Certificate of Status Desired   58.76 Additional Free Required   5. South April 8, etc.   27. Certificate of Status Desired   58.76 Additional Free Required   5. Certificate of Status Desired   58.76 Additional Free Required   5. Certificate of Status Desired   58.76 Additional Free Required   5. Certificate of Status Desired   58.76 Additional Free Required   5. Certificate of Status Desired   58.76 Additional Free Required   58.70 May 95						3. Date Incorporated or Qualified	3a. Date of	Last R	leport
1856 NALDO AVENUE   26   SAME   59-3131405   SAME							1996		
Suite Apt. 8, etc.    Suite Apt. 8, etc.   Scarificate of Status Desired   \$8.75 Adolficital Fee Recipility   Fee Recipility	T1 44 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4					<b>.</b>		Ar	oplied For
Copy A State   Copy A Added to Face   Copy A Copy					59-3131405 Not Applie			ot Applicable	
Added to Feese    JACKSONVILLE, PL   20	Suite, Apt #, etc				,	5. Certificate of Status Desired	, ,		
Solution		L	<u></u>						
9. Name and Address of Current Registered Agent  CHRISCHILLES, BRADLEY R. 1279 BELLMONTE TERR. #4  JACKSONVILLE, FL 32207-3259  80  84		Zip Country			ntry	8. This corporation has liability for intangible tax under s. 199.032,			
CHRISCHILLES, BRADLEY R.  1279 BELLMONTE TERR. #4  JACKSONVILLE, FL 32207-3259  1856 NALDO AVENUE  1856 NALDO AVENUE  1856 NALDO AVENUE  1857 NALDO AVENUE  1856 NALDO AVENUE  1958 NALD	9. Name and /			1001					
SECONDITIES   STATE					81 Name			-	
JACKSONVILLE, FL 32207-3259    B	CHRISCHILLES,	BRADLEY	R.						
11. Furnished to the provisions of Sections 647 (500 and 607 1508 Floride Statuto), and entered and corporation submits distanted for the purpose of changing is registered agent. The analysis of Floride Statuto, and the purpose of changing is registered agent. The analysis of the purpose of changing is registered agent. The analysis of the purpose of changing is registered agent. The analysis of the purpose of changing is registered agent. The analysis of the purpose of changing is registered such as the purpose of changing is registered agent. The purpose of changing is registered. The purpose of changing is registered. The purpose of changing is registered. The purpose of changing is registered agent. The purpose of changing is registered. The purpose of changing is registere					18	Address (P.O. Box Number is Not Acceptal	ole)		·
13. Furnishment to the provisions of Specimen CV 0502 and 607 1508. Florida Statutes have above anomal discrepancy as a statement for the purpose of changing also registered office or regist not appear to both, used Specimen CV office or registered appears to both, used Specimen CV office or registered appears to both, used Specimen CV of the appointment as registered agent appears to both used Specimen CV of the appointment as registered agent appears to both used Specimen CV of the appointment as registered agent appears registered agent appears registered agent appears to both used Specimen CV of the appointment as registered agent appears				i					
13. Purspect to the provisions of Section-607 (502) and 607 1508. Florida Statutes, his above-named corporation submits this statement for the purpose of changing its registered affect or project of the provision in the statement for the purpose of changing its registered affect or project of the provision in the statement for the purpose of changing its registered affect or project of the provision in the statement for the purpose of changing its registered affect or project or provision in the statement for the purpose of changing its registered affect or provision in the statement of directors. Hereby accept the purpose of changing its registered affect or provision in the companies of the provision in the provision in the statement of directors. Hereby accept the purpose of changing its registered affect or provision in the companies of the companies of the provision in the					84 City JA	CKSONVILLE	FL 85	Zip (	Code 207
Addition    Control   Cont	11. Parsuant to the provisions of	Sections 607.0502	and 607 1508, Florida Statu	ites, the at			ourpose of char	nging it	s registered
Addition    Control   Cont	agent Tam familiar with, an	r both, in the State of	Florida. Such change was on, of Section 607.0505, F	authoriza Iorida Stal	3 by the corp utes:	poration's board of directors. Thereby acce	pt the appointm	ient as	registered
D/P   DELETE   11 TITLE   D/S   Addition   DELETE   12 NAME   DELETE   12 NAME   DELETE   13 STREET ADDRESS   DATE   DELETE   14 DITLE   D/S   DELETE   D/S   D/S									
D/P	The state of the state of the	ed i egistorea agent	and title if applicable (HC	TE: Registered	i Agent signature	e required when reinstating)	DATE		
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2 4 CITY - \$T - 2P			235						
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St. 24   S							1		m 10
DELETE 6.1 TITLE 20002162 Party Addition  6.2 NAME -05/02/9701001006  17:51 7/07 St. 2/0  14. 1 do but by certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida Statutes, I further certify that the							H	) <i>4/2</i>	ンリノフ
6.2 NAME -05/02/9701001006  (1351-770) (27)  (14) 1 do bare by certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes, I further certify that the	· · · · · · · · · · · · · · · · · · ·		T neiere	_				<u> </u>	
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enformation 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 Lain an officer or director of the convertion of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	14. FOR TERROY CERTY MAIL the II reform at on indicated on this	mormation supplied : s annual report <del>er c</del> ol	viin ins tiling does not qua oplemental annual report is	illy for the true and a	exemption s ocurate and	tated in Section 119.07(3)(i), Fiorida Statute I that my signature shall have the same legs	s. I turther certi	iy that l ade unc	the derinath: that