

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # **V49890** (9)
1. Corporation Name
CHARRETTE INCORPORATED

Principal Place of Business Mailing Address
130 S. ORANGE AVE. **130 S. ORANGE AVE.**
ORLANDO FL 32801 **ORLANDO FL 32801**
US **US**

3. Date Incorporated or Qualified **07/10/1992** 3a. Date of Last Report **04/21/1994**

4. FEI Number **59-3140272** 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 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~CAROLAN, J. P. III~~ BUTLER, RICHARD GUY A.
~~201 S. ORANGE AVE.~~ 1554 WATERWATCH DRIVE
~~SUITE 860~~ ORLANDO, FL 32806
~~ORLANDO FL 32801~~

81 Name BUTLER, RICHARD GUY A.
82 Street Address (P.O. Box Number is Not Acceptable)
1554 WATERWATCH DRIVE
83
84 City ORLANDO FL 85 Zip Code 32806

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]* RICHARD GUY A. BUTLER 4/25/95
DATE

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME LEMONS, TIMOTHY J.
STREET ADDRESS 567 MOAT COURT
CITY-ST-ZIP ORLANDO FL

TITLE D
NAME BUTLER, RICHARD GUY A.
STREET ADDRESS 1554 WATERWATCH DRIVE
CITY-ST-ZIP ORLANDO FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE VICE PRESIDENT Change Addition
1.2 NAME de FLON, RICHARD L.
1.3 STREET ADDRESS 4610 J.C. NICHOLS PARKWAY
1.4 CITY-ST-ZIP KANSAS CITY, MISSOURI 64112

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

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

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

6.1 TITLE Change Addition
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 116.07(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: *[Signature]* TIMOTHY J. LEMONS / DIRECTOR 4/25/95 407-648-8888
DATE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number