

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2008 8:00 am
Secretary of State

02-18-2008 90008 002 ****61.25

DOCUMENT # 721551

1. Entity Name

CHATEAU-BY-THE-SEA, INC.



Principal Place of Business

3663 S. ATLANTIC AVENUE
 NEW SMYRNA BEACH FL 32169

Mailing Address

3663 S. ATLANTIC AVENUE
 NEW SMYRNA BEACH FL 32169



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

City & State

4. FEI Number

59-1410730

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRICKEL, KENT
 4715 HALL ROAD
 ORLANDO FL 32817

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Robin Zettler

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

(NOTE: Registered Agent signature required when reinstating)

2-6-08

DATE

FILE NOW - FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|-----------------|--------------------------------|---------------------------|-------------------------------------|
| D | GEMSCH, MARKUS | 1281 SEYBOLD TERRACE | DELTONA FL 32725 | <input type="checkbox"/> |
| D | SUTHERLAND, DON | 36213 CLEAR LAKE DR. | EUSTIS FL 32936 | <input checked="" type="checkbox"/> |
| S | SUTHERLAND, DEN | 1771 KILLARNY DR. | WINTER PARK FL 32789 | <input checked="" type="checkbox"/> |
| P | SHAVER, SHARON | 3663 S. ATLANTIC AVE UNIT 33 B | NEW SMYRNA BEACH FL 32169 | <input type="checkbox"/> |
| V | MULLER, JUDY | 201 CHELTON CIRCLE | WINTER PARK FL 32789 | <input type="checkbox"/> |
| D | FLOYD, MARIAN | 1475 DODD RD | WINTER PARK FL 32792 | <input checked="" type="checkbox"/> |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|-------|-----------------------|--------------------------------|----------------------------|---|
| D | Irma Tesche | 3663 S. ATLANTIC Ave unit 21 D | New Smyrna Beach, FL 32169 | <input type="checkbox"/> |
| | President & Treasurer | Toni Crawford | 989 Ponte Verda Blvd. | <input type="checkbox"/> |
| | | | Ponte Verda, FL 32082 | <input type="checkbox"/> |
| S | Sharon Shaver | 3663 S. ATLANTIC Ave Unit 33 B | New Smyrna Beach, FL 32169 | <input type="checkbox"/> |
| D | Judy Muller | 201 Chelton Circle | Winter Park, FL 32789 | <input type="checkbox"/> |
| VP | Amy Story | 1771 Killarney Drive | Winter Park FL 32789 | <input type="checkbox"/> |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robin Zettler Robin Zettler manager

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

26-08