

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746050

FILED
Mar 16, 2005
Secretary of State

Entity Name: CHATEAU TOWER, INC.

Current Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 59-2028061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: LARSON, LENA
Address: 7050 SUNSET DRIVE S, #808
City-St-Zip: S PASADENA, FL 33707

Title: D (X) Delete
Name: BURGESS, CHRISTINE
Address: 7050 SUNSET DRIVE #1010
City-St-Zip: SOUTH PASADENA, FL 33707

Title: D (X) Delete
Name: RAMOSKA, MARTHA
Address: 7050 SUNSET DRIVE S-604
City-St-Zip: S. PASADENA, FL 33707

Title: VD () Delete
Name: LUCAS, NORMAN
Address: 7050 SUNSET DRIVE S-306
City-St-Zip: S. PASADENA, FL 33707

Title: TD () Delete
Name: WALLER, PETER
Address: 7050 SUNSET DRIVE S #405
City-St-Zip: S. PASADENA, FL 33707

Title: PD () Delete
Name: TAMMANY, ED
Address: 7050 SUNSET DRIVE, #416
City-St-Zip: SOUTH PASADENA, FL 337072873

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ED TAMMANY

PD

03/16/2005

Electronic Signature of Signing Officer or Director

_____ Date