FTLE NOW: FILING FEE IS \$61.25

ANONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

758623

(3)

CHATEAU DE VILLE CONDOMINIUM ASSOCIATION, INC.

CHATERD DE VILLE GOIDOMINION AGGOGIATION, INC.										
Principal Place of Business		Mailing Address			100401 HOURT QUIDA HOURT BASIN 1000	J IIII OHOK DIDI				
2727 W. OAK RIDGE ROAD ORLANDO FL 32809		2727 W. OAK RIDGE ROAD ORLANDO FL 32809								
						 Date incorporated or Qualified 06/03/1981 	1	ate of Last F 02/16/19	1	
2. Principa! Pla	ace of Business	2a. Mailing Address				4. FEI Number 59-2227556			upplied For	
21 Cuto Ant d	K ata	Suite, Apt. #, etc.				09-2227000			lot Applicable Additional	
Suite, Apt #, etc.		27				5. Certificate of Status Desired			Required	
City & State		City & State				6. Election Campaign Financing) Мау Ве	
23	Country	Zip	Cou	nto.		Trust Fund Contribution 8. This corporation has liability for			to Fees	
Ζιρ 24	Country 25	29	30	iiu y			intangibre ta ☐ Yes []2		193.002,	
	9. Name and Address of Current					10. Name and Address of New F	legistered /	Agent		
81 Name Johnston, Paul										
SPENCER, DAVID B2 Street A					et Addres	S (P.O. Box Number is Not Acceptate	10)	0-1	カ - ビ	
2929 W OAK RIDGE RD				83	77	21 W. OAK KIC	re 1	Rd o	×-9	
E-3 ORLANDO FL 32809								- 1		
				84 City	OYK	ando	FL	. 85 3	3809	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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										
or register familiar wit	ed agent, or both, in the state of Florid th, and accept the obligations of Secti	on 617,0503, Florida Statutes.		OIPOIBIIO					oga	
SIGNATURE Paul 4: Valensten PRESIDEUT 1-24-96										
12.	Signature, typed or printed name of registered agent of OFFICERS AND		13.	Agent signati	nte recionad A	ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12	
TITLE	D	DELETE	1.1 Ti	TLE	┰ ~	D		☐ Change	Addition	
NAME	HARGRAVE, VERNON		1.2 N	AME	PA	ul Johns Tow. Pres 27 WOAK Ridge R	MAT .	-		
STREET ADDRESS	5605 LAKE MARY JESS SHOP	RCT	1.3 \$	REET ADDRE	ss 27	21 WOAK Ridge R	තු ∂-5)		
CITY-ST-ZIP	ORLANDO FL			TY-ST-ZIP		lando, FL 3280	Ч		Addition	
TITLE	D	DEFELE	2.1 10		يري ا	Darles HopeGil, Sec		Change	L_ Addition	
NAME	HOPE-GILL, CHARLES		2.2 N		1600	Masters Alud				
STREET ADDRESS	6068 MASTERS BLVD.			ineet addre hty-st-zip		ando 74 \$2819				
CITY-ST-ZIP TITLE	ORLANDO FL D	DELETE	3.1 Ti		1	<u> </u>		Change	Addition	
NAME	SPENCER, DAVID	_	3.2 N	AME	1	WW Spencer				
STREET ADDRESS	2929 WEST OAK RIDGE ROAL	D, D -3	33S	FREET ADDRE	SS 29	29 W LAKRAGE Ka	E-3			
CITY-ST-ZIP	ORLANDO FL		_	ITY-ST-ZIP		1 bando 31 32809		[](hann)	Addition	
TITLE	D	DELETE	4.1 T		D	al Watsum		☐ Change	M WOOHIGH	
NAME	MIKHAIL, NABIL 5360 RAMBOO CT		4.21	iame Treet addre	30	el Hatdum 29 Work Ribge	Rd 1	D-5		
STREET ADDRESS	ORLANDO FL	•		ITY-ST-ZIP		lando FI 32809	<i>`</i>			
CITY-S1-ZIP TITLE	D D	DELETE	5.1 T			b		Change	Addition	
NAME	WEFKY, MANSOUR		5.2 N	AME				-		
STREET ADDRESS	8976 ISLESWORTH CT		5.3 S	TREET ADDRE		Listes worth c	T			
CITY ST-ZIP	ORLANDO FL			ITY-ST-ZIP	or	19 ndo 71		Change	Addition	
TITLE		DELETE	6.1 T					Criange	1 Mudition	
NAME			6.2 N	ame Treet addre	ec 1		11			
STREET ADDRESS			-	THEET ADDRE	" (\$\mathbb{S}\)	dep. by bank	\$61	1.25		
CITY-ST-ZIP 14. I do hereb	y certify that the information supplied i	with this filing is voluntarily furn	ished and	does not	quality for	the exemption stated in Section 119	0.07(3)(k), Fid	orida Statu	les. I further	

4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 is 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT.

1-24-96

Befure Proce 8

2-16-96

CR2E037 (12/95)