


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90108 043 ***150.00

DOCUMENT # H54886

1. Entity Name
CLUB CHALET COOPERATIVE ASSOCIATION, INC.



Principal Place of Business
7880 54TH AVENUE NORTH
ST. PETERSBURG, FL 33710 US

Mailing Address
7850 ULMERTON ROAD
SUITE 1
LARGO, FL 33771 US

14006208



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

03262004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent
HOLIDAY ISLES PROPERTY MANAGEMENT
7850 ULMERTON ROAD
SUITE 1
LARGO, FL 34641

7. Name and Address of New Registered Agent
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRUNO, CHARLES <input checked="" type="checkbox"/> Delete 7880 54TH AVE. N. #96 SAINT PETERSBURG, FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHNEK, MARJORIE <input type="checkbox"/> Delete 7880 54TH AVENUE, #126 ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GISHBAUGHER, PATRICIA <input type="checkbox"/> Delete 7880 54TH AVENUE, #115 ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GISHBAUGHER, JACK <input type="checkbox"/> Delete 7880 54TH AVE N, #194 ST. PETERSBURG, FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KOPET, FRANK <input checked="" type="checkbox"/> Delete 7880 54TH AVENUE N #48 SAINT PETERSBURG, FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAUBER, BILL <input type="checkbox"/> Delete 7880 54TH AVENUE N #122 ST. PETERSBURG, FL 33709

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Kraus, Jerry <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7880-54th Ave. N. #25 St. Pete, FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Traxler, Grace <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7880-54th Ave N. #61 St. Pete, FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bowers, Jerry <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7880-54th Ave. N. #116 St. Pete, FL 33709
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Robertson, Ken <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7880-54th Ave. N. #80 St. Pete, FL 33709

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Marjorie G. Schnek 04/20/04 (727) 546-1926
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Marjorie Schnek - President