


**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Mar 02, 2004 8:00 am**  
**Secretary of State**

03-02-2004 90029 044 \*\*\*\*61.25

**DOCUMENT # N02000003675**

1. Entity Name  
**CHEVY CHASE PROPERTY OWNERS' ASSOCIATION, INC.**



Principal Place of Business      Mailing Address

1213 CHEVY CHASE DRIVE      1213 CHEVY CHASE DRIVE  
SUN CITY CENTER FL 33573      SUN CITY CENTER FL 33573

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

4. FEI Number      Applied For

27-0015628      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required

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MOORE CR2E037 (11/03)

6. Name and Address of Current Registered Agent

PETERSEN, SHIRLEY M  
1516 CHEVY CHASE DRIVE  
SUN CITY CENTER FL 33573

7. Name and Address of New Registered Agent

Name: James Shockley  
Street Address (P.O. or Box Numbers Not Acceptable): 1229 Chevy Chase Drive  
City: Sun City Center FL Zip Code: 33573

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: *James Shockley*      JAMES SHOCKLEY      2-26-04

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

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

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

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**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROVER, MARIAN E 1213 CHEVY CHASE DRIVE SUN CITY CENTER FL 33573 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILL, LEO J 1504 CHEVY CHASE DRIVE SUN CITY CENTER FL 33573 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VARJIAN, VIRGINIA 1512 CHEVY CHASE DRIVE SUN CITY CENTER FL 33573 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, MERRILL 1510 CHEVY CHASE DRIVE SUN CITY CENTER FL 33573 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANSEN, GEORGE 1522 CHEVY CHASE DRIVE SUN CITY CENTER FL 33573 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Wimona Dobratz 1219 Chevy Chase Dr Sun City Center FL 33573 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dean Merrill 1518 Chevy Chase Dr Sun City Ctr. FL 33573 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ira Lou Franklin 1217 Chevy Chase Dr Sun City Ctr. FL 33573 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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	

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 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: *Virginia T. Varjian*      VIRGINIA T. VARJIAN      2/26/04      813-634-5288

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #