


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 24, 2005 08:00 AM
Secretary of State

DOCUMENT # N02000003675 1. Entity Name CHEVY CHASE PROPERTY OWNERS' ASSOCIATION, INC.		
Principal Place of Business 1213 CHEVY CHASE DRIVE SUN CITY CENTER FL 33573		Mailing Address 1213 CHEVY CHASE DRIVE SUN CITY CENTER FL 33573
2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State
Zip	Country	Zip



1st MOORE CR2E037 (10/04)

4. FEI Number 27-0015628		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHOCKLEY, JAMES
1229 CHEVY CHASE DRIVE
SUN CITY CENTER FL 33573

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 *James B. Shockley* **James B. Shockley** 2-18-05
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, 2005

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	
TITLE	D <input type="checkbox"/> Delete
NAME	GROVER, MARIAN E
STREET ADDRESS	1213 CHEVY CHASE DRIVE
CITY - ST - ZIP	SUN CITY CENTER FL 33573
TITLE	D <input type="checkbox"/> Delete
NAME	HILL, LEO J
STREET ADDRESS	1504 CHEVY CHASE DRIVE
CITY - ST - ZIP	SUN CITY CENTER FL 33573
TITLE	D <input type="checkbox"/> Delete
NAME	VARJIAN, VIRGINIA
STREET ADDRESS	1512 CHEVY CHASE DRIVE
CITY - ST - ZIP	SUN CITY CENTER FL 33573
TITLE	D <input type="checkbox"/> Delete
NAME	MERRILL, DEAN
STREET ADDRESS	1518 CHEVY CHASE DR
CITY - ST - ZIP	SUN CITY CENTER FL 33573
TITLE	D <input type="checkbox"/> Delete
NAME	HANSEN, GEORGE
STREET ADDRESS	1522 CHEVY CHASE DRIVE
CITY - ST - ZIP	SUN CITY CENTER FL 33573
TITLE	D <input type="checkbox"/> Delete
NAME	DOBRATZ, WINONA
STREET ADDRESS	1219 CHEVY CHASE DR
CITY - ST - ZIP	SUN CITY CENTER FL 33573

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	UN0000240913
STREET ADDRESS	02/24/05-80023-005 61.25
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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)(f), 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** 2-18-05 813-634-5788
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #