

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 16, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90223 020 \*\*\*\*61.25

**DOCUMENT # N03000008472**

1. Entity Name  
**CHAPIN STATION HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business  
**2300 LEE ROAD  
WINTER PARK, FL 32789**

Mailing Address  
**2300 LEE ROAD  
WINTER PARK, FL 32789**

**50002957**



2. Principal Place of Business

**5401 S. KIRKMAN RD.**

3. Mailing Address

**5401 S. KIRKMAN RD.**

Suite, Apt. #, etc.

**SUITE 450**

Suite, Apt. #, etc.

**SUITE 450**

City & State

**ORLANDO, FL**

City & State

**ORLANDO, FL**

Zip

**32819**

Country

**USA**

Zip

**32819**

Country

**USA**

01052006

Chg-NP

CRZE037 (11/05)

4. FEI Number  
**52-2444650**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**DYE, RICHARD A  
2300 LEE ROAD  
WINTER PARK, FL 32789**

7. Name and Address of New Registered Agent

Name **COMMUNITY MANAGEMENT PROFESSIONALS, INC.**  
Street Address (P.O. Box Number is Not Acceptable)  
**5401 S. KIRKMAN ROAD**  
**SUITE 450**  
City **ORLANDO** FL **32819**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

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** ☒ Delete  
NAME **DYE, RICHARD A**  
STREET ADDRESS **2300 LEE ROAD**  
CITY-ST-ZIP **WINTER PARK, FL 32789**

TITLE **D** ☒ Delete  
NAME **KALIN, B MICHAEL**  
STREET ADDRESS **2300 LEE ROAD**  
CITY-ST-ZIP **WINTER PARK, FL 32789**

TITLE **D** ☒ Delete  
NAME **ALPERT, JAY**  
STREET ADDRESS **2300 LEE ROAD**  
CITY-ST-ZIP **WINTER PARK, FL 32789**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP** ☐ Change ☐ Addition  
NAME **MERCEDES KWADER**  
STREET ADDRESS **1338 HUNTERMAN ROAD**  
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE **DVP** ☐ Change ☐ Addition  
NAME **CHRIS MARTINEZ**  
STREET ADDRESS **1838 LINDZUM ST.**  
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE **DT** ☐ Change ☐ Addition  
NAME **TERRY ROSENBERG**  
STREET ADDRESS **1712 LINDZUM ST.**  
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE **DS** ☐ Change ☐ Addition  
NAME **DENNIS SUTARELL**  
STREET ADDRESS **1426 LINDZUM ST.**  
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE **D** ☐ Change ☐ Addition  
NAME **JIM BRITT**  
STREET ADDRESS **1530 LINDZUM ST.**  
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-9-06 321-303-4817**

Date

Daytime Phone #