

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 08, 2006
Secretary of State**

DOCUMENT# N13405

Entity Name: CHELSEA WOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2868 CHELSEA PLN
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

PO BOX 14057
CLEARWATER, FL 33766

New Mailing Address:

FEI Number: 59-2804327 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBSEN, ALLEN L
2868 CHELSEA PL. N.
CLEARWATER, FL 33759 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COOK, GARY
Address: 2885 CHELSEA PL N
City-St-Zip: CLEARWATER, FL 33759

Title: VPD () Delete
Name: POTENZA, JOHN
Address: 2853 CHELSEA PLACE NORTH
City-St-Zip: CLEARWATER, FL 33759

Title: VPD () Delete
Name: JACOBSEN, ALLEN
Address: 2868 CHELSEA PL N
City-St-Zip: CLEARWATER, FL 33759

Title: SD () Delete
Name: O'BRIEN, RONDA
Address: 2865 CHELSEA PLACE NORTH
City-St-Zip: CLEARWATER, FL 33759

Title: S () Delete
Name: BEFAZIO, BETH
Address: 2845 CHELSEA PL. S.
City-St-Zip: CLEARWATER, FL 33759

Title: T () Delete
Name: MENAUL, JERI
Address: 2820 CHELSEA PL. N.
City-St-Zip: CLEARWATER, FL 33759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: MAIDEN, JAY C
Address: 2821 CHELSEA PLACE S
City-St-Zip: CLEARWATER, FL 33759

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: O'BRIEN, KEVIN
Address: 2865 CHELSEA PL. N.
City-St-Zip: CLEARWATER, FL 33759

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLEN JACOBSEN

Electronic Signature of Signing Officer or Director

VPD

02/08/2006

Date