


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90207 036 ****61.25

DOCUMENT # N94000004661					
1. Entity Name CHESTNUT ESTATES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 8009 S ORANGE AV ORLANDO, FL 32809 US			Mailing Address 8009 S ORANGE AV SUITE 110 ORLANDO, FL 32809 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent LELAND MGMT. 8009 S ORANGE AVE ORLANDO, FL 32809				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MASTERTON, JOHN		NAME	SEE ATTACHED	
STREET ADDRESS	229 BLUE CREEK DR		STREET ADDRESS		
CITY-ST-ZIP	WINTER SPRINGS, FL 32708		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BROWN, JAMES		NAME		
STREET ADDRESS	233 BLUE CREEK DR		STREET ADDRESS		
CITY-ST-ZIP	WINTER SPRINGS, FL 32708		CITY-ST-ZIP		
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WHITE, GRISELDA		NAME		
STREET ADDRESS	213 BLUE CREEK DR		STREET ADDRESS		
CITY-ST-ZIP	WINTER SPGSD, FL 32708		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: <i>Rebecca Furlow</i>		REBECCA FURLOW		4/18/06 407-447-9955	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

40055750



04182006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-3289678 Applied For Not Applicable

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

ATTACHMENT 40055790

N9400004661

RUN DATE: 4/18/06
RUN TIME: 9:13 AM

Chestnut Estates Homeowners Association, Inc.
BOARD/COMMITTEE MEMBERS REPORT AS OF 04/18/06

PAGE 1

NAME/ADDRESS	TITLE/E-MAIL	WORK/FAX	HOME/CELL	TERM EXPIRATION

CLASS: PRESIDENT				
John W. & Anne M. Masterson 229 Blue Creek Drive Winter Springs FL 32708			321-436-6538	
CLASS: VICE PRESIDENT				
Griseld White 213 Blue Creek Drive Winter Springs FL 32708				
CLASS: SECRETARY				
David C. Nissen 227 Blue Creek Drive Winter Springs FL 32708				
CLASS: TREASURER				
Mark Kilmer 219 Blue Creek Drive Winter Springs FL 32708				
CLASS: DIRECTOR				
Patrick Rugg 231 Blue Creek Drive Winter Springs FL 32708				
Paul H Sapp 128 Blue Creek Drive Winter Springs FL 32708				
John Charlesworth 211 Blue Creek Drive Winter Springs FL 32708			407-365-3612	

-- End of report --