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FILED

Aug 11 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam,  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N02766 (6)

1. Corporation Name

CHANCELLORS ROW HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

2620 GRADUATE COURT  
ORLANDO FL 32826

Mailing Address

2620 GRADUATE COURT  
ORLANDO FL 32826-3901

3. Date Incorporated or Qualified  
04/26/1984

3a. Date of Last Report  
05/01/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number  
59-2457309

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ANDERSON, CARLA  
254 STILLWATER DR  
OVIEDO FL 32765

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPD  
NAME JOANNIDES-BURGOS, LESLIE  
STREET ADDRESS 4052 LAKE MIRA DR.  
CITY-ST-ZIP ORLANDO FL 32826 ☐ DELETE

TITLE PD  
NAME WHYLAND, CHRISTOPHER  
STREET ADDRESS 2710 GRADUATE COURT  
CITY-ST-ZIP ORLANDO FL 32826 ☐ DELETE

TITLE D  
NAME DAHL, ERIC  
STREET ADDRESS 2843 LASER COURT  
CITY-ST-ZIP ORLANDO FL 32826 ☒ DELETE

TITLE SD  
NAME GENAO, NELSON  
STREET ADDRESS 2656 GRADUATE COURT  
CITY-ST-ZIP ORLANDO FL ☐ DELETE

TITLE TD  
NAME BELL, GENE  
STREET ADDRESS 2856 GRADUATE CT.  
CITY-ST-ZIP ORLANDO FL 32826 ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME Karin Byron  
1.3 STREET ADDRESS 2620 Laser Court  
1.4 CITY-ST-ZIP Orlando FL 32826 ☐ Change ☒ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)