2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001789

Jul 07, 2005 Secretary of State

Entity Name: COUNTRY CHASE MASTER HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2630 SOUTH FALKENBERG 3974 TAMPA ROAD RIVERVIEW, FL 33569

OLDSMAR, FL 34677

Current Mailing Address: New Mailing Address:

2630 SOUTH FALKENBERG P.O. BOX 2157

RIVERVIEW, FL 33569 OLDSMAR, FL 34677

FEI Number: 01-0674058 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRADEY, MICHAEL HANSON, JACK B AGENT 28100 UŚ 19 N. #300 3974 TAMPA ROAD CLEARWATER, FL 33761 US

OLDSMAR, FL 34677 US

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: JACK B. HANSON 07/07/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete (X) Change () Addition

KESLER, AL BARRETT, MARK Name: Name: 12352 COUNTRYWHITE CIRCLE Address: 12352 COUNTRYWHITE CIRCLE Address:

City-St-Zip: TAMPA, FL 33635 City-St-Zip: TAMPA, FL 33635

Title: () Delete Title: (X) Change () Addition MARTINEZ, KIM Name: GONZALES, DOREEN Name:

Address: 8550 TIDAL BAY LANE Address: 12404 RUSTIC VIEW COURT City-St-Zip: TAMPA, FL 33635 City-St-Zip: TAMPA, FL 33635

Title: () Delete Title: (X) Change () Addition

FREY, DEBRA FRIEDICH, ANNETTE Name: Name: Address: 8506 TIDAL BAY LANE Address: 12482 COUNTRY WHITE CIRCLE

City-St-Zip: TAMPA, FL 33635 City-St-Zip: TAMPA, FL 33635

() Delete Title: Title: DS (X) Change () Addition

ZUCKOWSKI, JOSEPH Name: Name: FREY, DEBRA 12201 COUNTRYWHITE CIRCLE Address: Address: 8506 TIDAL BAY LANE City-St-Zip: TAMPA, FL 33635 City-St-Zip: TAMPA, FL 33635

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARK BARRETT PD 07/07/2005