

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001459

FILED  
Apr 17, 2008  
Secretary of State

**Entity Name:** COUNTRY CHASE TOWNHOMES PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

AMERI-TECH REALTY, INC.  
1799-B NORTH BELCHER ROAD  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 14357  
CLEARWATER, FL 33766

**New Mailing Address:**

**FEI Number:** 59-3725956

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AMERI-TECH REALTY, INC.  
1799-B NORTH BELCHER ROAD  
CLEARWATER, FL 33766 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: FRIEDRICH, ANNETTE  
Address: 12482 COUNTRY WHITE CIRCLE  
City-St-Zip: TAMPA, FL 33635

Title: VPD ( ) Delete  
Name: ALHADEFF, SARAH  
Address: 12287 COUNTRY WHITE CIRCLE  
City-St-Zip: TAMPA, FL 33635

Title: TD ( ) Delete  
Name: SMITH, JODY  
Address: 12285 COUNTRY WHITE CIRCLE  
City-St-Zip: TAMPA, FL 33635

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ANNETTE FRIEDRICH

PD

04/17/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date