

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000001314

**FILED**  
**Mar 31, 2021**  
**Secretary of State**  
**4665022611CC**

**Entity Name:** CHASTAIN MANOR PHASE II HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4708 CAPITAL CIR NW  
TALLAHASSEE, FL 32303-7217

**Current Mailing Address:**

4708 CAPITAL CIR NW  
TALLAHASSEE, FL 32303-7217 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

MANAUSA, DANIEL E  
1701 HERMITAGE BLVD #100  
TALLAHASSEE, FL 32308 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name GHAZVINI, JASON  
Address 4708 CAPITAL CIR NW  
City-State-Zip: TALLAHASSEE FL 32303-7217

Title VPTD  
Name ASBURY, THOMAS  
Address 4708 CAPITAL CIR NW  
City-State-Zip: TALLAHASSEE FL 32303-7217

Title SD  
Name GHAZVINI, BEHZAD  
Address 4708 CAPITAL CIR NW  
City-State-Zip: TALLAHASSEE FL 32303-7217

Title VP  
Name ASBURY, THOMAS JR.  
Address 4708 CAPITAL CIR NW  
City-State-Zip: TALLAHASSEE FL 32303-7217

*I hereby 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 all other like empowered.*

**SIGNATURE: BEHZAD GHAZVINI**

**MGR**

**03/31/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date