## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001847

Entity Name: THE CHAPMAN OAKS HOMEOWNERS' ASSOCIATION, INC.

FILED
Mar 21, 2018
Secretary of State
CC4158129230

## **Current Principal Place of Business:**

498 PALM SPRINGS DR STE 210 ALTAMONTE SPRINGS. FL 32701

## **Current Mailing Address:**

498 PALM SPRINGS DR STE 210 ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 65-0633506 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LOCASCIO, MARYJO C/O SIGNATURE MANAGEMENT SOLUTIONS LLC 498 PALM SPRINGS DR STE 210 ALTAMONTE SPRINGS, FL 32701 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: MARYJO LOCASCIO 03/21/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name DANSEREAU, DAVID Name WESTHELLE, JEFF

Address 498 PALM SPRINGS DR STE 210 Address 498 PALM SPRINGS DR STE 210

City-State-Zip: ALTAMONTE SPRINGS FL 32701 City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title SECRETARY Title TREASURER

Name LEONARD, TERESA Name LANGHORST, THOMAS

Address 498 PALM SPRINGS DR STE 210 Address 498 PALM SPRINGS DR STE 210
City-State-Zip: ALTAMONTE SPRINGS FL 32701 City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR

Name WIESNER, BRIAN

Address 498 PALM SPRINGS DR STE 210
City-State-Zip: ALTAMONTE SPRINGS FL 32701

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: DAVID DANSEREAU

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

03/21/2018