

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90029 017 ****61.25

DOCUMENT # 725948	
1. Entity Name COUNTRY CLUB CHALET ASSOCIATION, INC.	

Principal Place of Business COUNTRY CLUB DRIVE NEW SMYRNA BCH, FL 32168	Mailing Address 16C-COUNTRY CLUB DR NEW SMYRNA BEACH, FL 32168
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

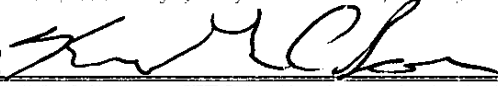


01272006 Chg-NP CR2E037 (12/06)

4. FEI Number 59-1602867		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$6.75 Additional Fee Required

6. Name and Address of Current Registered Agent YOUNG, ARLINGTON B 31-C COUNTRY CLUB DR. NEW SMYRNA BEACH, FL 32168		7. Name and Address of New Registered Agent Name TAYLOR, KENNETH Street Address (P.O. Box Number is Not Acceptable) 11-A COUNTRY CLUB DR. NEW SMYRNA BEACH FL 32168	
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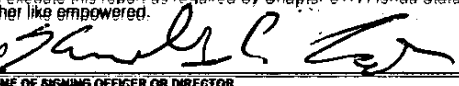
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **KENNETH TAYLOR** 
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YOUNG, ARLINGTON B 31-C COUNTRY CLUB DR. NEW SMYRNA BEACH, FL 32168 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KENNETH TAYLOR 11-A COUNTRY CLUB DR. NEW SMYRNA BEACH, FL 32168 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD YOUNG, ANNETTE 12-A COUNTRY CLUB DR. NEW SMYRNA BEACH, FL 32168 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD RALPH JOHNSON 21-B COUNTRY CLUB DR NEW SMYRNA BEACH, FL 32168 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDTD OSBORNE, KATHLEEN 20-B COUNTRY CLUB DR. NEW SMYRNA BEACH, FL 32168 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OSBOURNE, KATHLEEN 20B COUNTRY CLUB DR NEW SMYRNA BEACH, FL 32168 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH TAYLOR 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #