

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725948

FILED
Feb 28, 2009
Secretary of State

Entity Name: COUNTRY CLUB CHALET ASSOCIATION, INC.

Current Principal Place of Business:

COUNTRY CLUB DRIVE
NEW SMYRNA BCH, FL 32168

New Principal Place of Business:

Current Mailing Address:

16C-COUNRTY CLUB DR
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 59-1502667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNETH, TAYLOR
11-A COUNTRY CLUB DR
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

OLA, DRAGON
6-A COUNTRY CLUB DR
NEW SMYRNA BEACH, FL 32168 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: OLA DRAGON

02/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TAYLOR, KENNETH
Address: 11-A COUNTRY CLUB DR
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VPD () Delete
Name: JOHNSON, RALPH
Address: 12-B COUNTRY CLUB DR
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: SDTD () Delete
Name: OSBORNE, KATHLEEN
Address: 20-B COUNTRY CLUB DR.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: SD () Delete
Name: OSBOURNE, KATHLEEN
Address: 20B COUNTRY CLUB DR
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DRAGON, OLA
Address: 6-A COUNTRY CLUB DR
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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

Title: D (X) Change () Addition
Name: OSBORNE, KATHLEEN
Address: 20-B COUNTRY CLUB DR.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: SD (X) Change () Addition
Name: BUTTS, ANNA
Address: 16-B COUNTRY CLUB DR
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: TD () Change (X) Addition
Name: BAIM, CALVIN
Address: 20-A COUNTRY CLUB DR
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: ANNA BUTTS

SD

02/28/2009

Electronic Signature of Signing Officer or Director

Date