2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State
05-11-2007 90026 004 ****61.25

DOCUMENT # 736697

1. Entity Name
THE CHATEAUX CLUB, INC.

Principal Place of Business	Mailing Address
7071 W. COMMERCIAL BLVD STE 28 TAMARAC, FL 33319	7071 W. COMMERCIAL BLVD STE 28 TAMARAC, FL 33319

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

01312007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2201969 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SUNRAE MANAGEMENT SERVICES, INC. 7071 W. COMMERCIAL BLVD. SUITE 28 TAMARAC, FL 33319	Name SUNRAE PROPERTY MANAGEMENT Street Address (P.O. Box Number is Not Acceptable) 7071 W. COMMERCIAL BLVD, #28 City TAMARAC FL Zip Code 33319

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 Jeff Goldberg 5/1/07
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, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HUDSON, SAMANTHA 20271 W OAK HAVEN CIR MIAMI, FL 33179	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HUDSON, SAMANTHA 20271 W. OAK HAVEN CIR. MIAMI, FL 33179	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LABATON, SANDY 20001 W OAK HAVEN CIR MIAMI, FL 33179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SCHWARTZ, HARVEY 1938 N. OAK HAVEN CIR. MIAMI, FL 33179	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D POLITANO, JOHNATHAN 20215 W OAK HAVEN CIRCLE N. MIAMI, FL 33179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SCHWARTZ, HARVEY 1938 N OAK HAVEN CIR NORTH MIAMI, FL 33179	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WEINSTEIN, STEVEN W 1930 N. OAK HAVEN CIR. MIAMI, FL 33179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SACKS, STUART 1965 S. OAK HAVEN CIRCLE N. MIAMI, FL 33179	☐ 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: SAMANTHA Hudson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #