

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737383

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: CHATEAULAINE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

11591 NW 1ST ST  
PLANTATION, FL 33325

**New Principal Place of Business:**

**Current Mailing Address:**

11591 NW 1ST ST  
PLANTATION, FL 33325

**New Mailing Address:**

FEI Number: 59-1828365      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DANER, INEZ  
11551 NW 2ND ST  
PLANTATION, FL 33325      US

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

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

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: CARPENTER, ERNEST  
Address: 11583 NW 2 ST.  
City-St-Zip: PLANTATION, FL 33325

Title: TD ( ) Delete  
Name: DANER, INEZ  
Address: 11551 NW 2ND ST  
City-St-Zip: PLANTATION, FL 33325

Title: D ( ) Delete  
Name: OTTO GROSSMAN,  
Address: 11575 NW 2ND ST  
City-St-Zip: PLANTATION, FL 33325

Title: PD ( ) Delete  
Name: HENRY, ANDRE  
Address: 191 NW 115 TERRACE  
City-St-Zip: PLANTATION, FL 33325

Title: D ( ) Delete  
Name: DODGEN, TRICIA  
Address: 11576 NW 1 ST  
City-St-Zip: PLANTATION, FL 33325

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: CHRISTIE JACKSON,  
Address: 11571 NW 2ND ST  
City-St-Zip: PLANTATION, FL 33325

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: INEZ DANER

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

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04/16/2007

\_\_\_\_\_ Date