2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750194

Apr 21, 2009 Secretary of State

Entity Name: THE CHATEAU CONDOMINIUM MOTEL ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2700 GULF BLVD 2700 GULF BLVD.

BELLEAIR BLUFFS, FL 33786 BELLEAIR BEACH, FL 33786 US LIS

Current Mailing Address: New Mailing Address:

%CMG P.O. 60068

ST PETERSBURG, FL 33784 US

FEI Number: 59-2011500 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WELTON, RONALD D 5444 PARK BLVD. #101 PINELLAS PARK, FL 33781 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:

Address:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

1654 WINDSOK DR

() Delete

(X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

HITE, ROBIN HITE, ROBIN Name: Name: 2700 GULF BLVD #1 Address: 2700 GULF BLVD #1 Address:

City-St-Zip: BELLEAIR BEACH, FL 33786 City-St-Zip: BELLEAIR BEACH, FL 33786 US

Title:

Title: () Delete (X) Change () Addition EDWARDS, DONALD R Name: EDWARDS, DONALD R Name: Address: 2700 GULF BLVD., #8W Address: 2700 GULF BLVD., #8W City-St-Zip: BELLEAIR BEACH, FL City-St-Zip: BELLEAIR BEACH, FL 33786 US

Title: () Delete Title: ST (X) Change () Addition HITE, DENNIS HITE, DENNIS Name: Name: 2700 GULF BLVD. #7W Address: Address: 2700 GULF BLVD. #7W

City-St-Zip: BELLEAIR BEACH, FL 33786 City-St-Zip: BELLEAIR BEACH, FL 33786 US

Title: () Delete Title: (X) Change () Addition

Name: KAPLAN, ROBIN Name: KAPLAN, ROBIN 2700 GULF BLVD #1W 2700 GULF BLVD #1W Address: Address:

City-St-Zip: BELLEAIR BEACH, FL 33786 City-St-Zip: BELLEAIR BEACH, FL 33786 US

Title: () Delete Title: (X) Change () Addition ROCCHIA, SALLY RECCHIA, SALLY Name: Name:

2700 GULF BLVD BELLEAIR BEACH, FL 33786 US City-St-Zip: CLEARWATER, FL 33755 City-St-Zip:

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.

Address:

SIGNATURE: ROBIN HITE D 04/21/2009