2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED Feb 20, 2008 8:00 am Secretary of State

DOCUMENT # 758496 1. Entity Name CITRUS CHASE HOMEOWNERS' ASSOCIATION, INC.					,	02-20-200	0 8 90007 00)4 ****6	1.25
Principal Place 5205 S. ORA STE. 206 ORLANDO, F		Mailing Address 5205 S. ORANGE AVE. STE. 206 ORLANDO, FL 32809	US		- 				[
Principal Place of Business - No P.O. Box # 3. Ma		3. Mailing Address .	Mailing Address .						
		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01152008	Chg-NP	CR2E037	(12/06)	
City & State		City & State	City & State		4. FEI Number 59-21765	02			pplied For at Applicable
Zip	Country	Zip	Country —	-	5. Certificate of S	Status Desired		8.75 Add	
	6. Name and Address of Current R	legistered Agent			7. Name and Ad	dress of New	Registered A	gent	
NOUSE OF MONT ENT				€					
HOUSE OF MGMT ENT. 5205 S. ORANGE AVE., STE. 206 ORLANDO, FL 32809			Stree	Street Address (P.O. Box Number is Not Acceptable)					
			City				FL	Zip Code	9
8. The above the obligat SIGNATURE	named entity submits this statement for ions of registered agent. Signature, typed or printed name of registered agent are		registered office			n the State of F	Florida. I am fa	miliar with,	and accept
			9. Election Campaign Financing Trust Fund Contribution.						
'	Filing Fee is \$61.25 Due by May 1, 2008				\$5.00 May Be Added to Fees		Make check orida Departr		
10.		Trust Fund C				Fk	orida Departr	nent of St	ate.
	Due by May 1, 2008	Trust Fund C	ontribution.		Added to Fees	GES TO OFFIC	orida Departr	CTORS IN	ate.
10.	Due by May 1, 2008 OFFICERS AND DIRE	Trust Fund C	11.		Added to Fees	GES TO OFFIC	orida Departr	CTORS IN	10
10. TITLE NAME STREET ADDRESS	OFFICERS AND DIRE OFFICERS AND DIRE O, MISKO, JOHN 8419 CITRUS CHASE DR.	Trust Fund C	11. TITLE NAME STREET ADDRES		Added to Fees	GES TO OFFIC	orida Departr	CTORS IN	10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECTOR OF STREET	Trust Fund C	11. IIILE NAME STREET ADDRES CIFY-ST-ZIP		Added to Fees	GES TO OFFIC	Could Ball Ball Ball Ball Ball Ball Ball Ba	ECTORS IN Change	10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRE OFFICERS AND DIRE D. MISKO, JOHN 8419 CITRUS CHASE DR. ORLANDO, FL 32836 VP	Trust Fund C	11. 11LE NAME STREET ADDRES CIFY-ST-ZIP TITLE		Added to Fees	GES TO OFFIC	Could Ball Ball Ball Ball Ball Ball Ball Ba	CTORS IN	10
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indicated on this report or supplied with this liling coes not quality for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 a paddress, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

108 401-852-5300 Daytime Phone #