


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 17, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # 762712**  
 1. Entity Name  
 EAGLE CHASE HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business  
 3238 GOLDEN EAGLE LANE  
 SARASOTA, FL 34231-7380

Mailing Address  
 3238 GOLDEN EAGLE LANE  
 SARASOTA, FL 34231-7380

**DO NOT WRITE IN THIS SPACE**



02262008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2435804	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MORAN, GEORGE  
 3224 GOLDEN EAGLE LANE  
 SARASOTA, FL 34231

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2008**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARPER, JAN 3217 GOLDEN EAGLE LN SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KIDNEY, JANE 3215 GOLDEN EAGLE LN SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD NOE, KATHERINE 3237 GOLDEN EAGLE LN SARASOTE, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARTER, ROBERT 3237 GOLDEN EAGLE LN SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

000005562048  
 04/03/08-80033-021 \$1.25

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:  **ROBERT J. CARTER** 3/6/08 955-2122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #