2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000016

FILED Feb 11, 2009 Secretary of State

Entity Name: THE CHATLOS FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 710 MIAMI SPRINGS DR. LONGWOOD, FL 32779 **Current Mailing Address: New Mailing Address:** PO BOX 915048 LONGWOOD, FL 327915048 FEI Number: 13-6161425 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MORGAN, CHARLES O JR 1300 NW 167TH ST., SUITE 3 MIAMI, FL 33169 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CD () Delete () Change () Addition RANDLE, KATHRYN Name: Name: 757 SEA SHORE RD. Address: Address: City-St-Zip: CAPE MAY, NJ 08204 City-St-Zip: Title: PD () Delete Title: () Change () Addition CHATLOS, WILLIAM J Name: Name: Address: 201 RIVERVIEW DR. Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: () Delete Title: () Change () Addition RANDOM, CINDEE Name: Name: Address: 10695 WREN RIDGE ROAD Address: City-St-Zip: ALPHARETTA, GA 30022 City-St-Zip: () Delete Title: Title: () Change () Addition MORGAN, JR., CHARLES O Name: Name: 1300 NW 167TH ST., SUITE 3 Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: Title: DVS () Delete Title: () Change () Addition ROACH, MICHELE Name: Name: 132 HONORS WAY Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: Title: () Delete Title: (X) Change () Addition

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.

Name:

Address:

City-St-Zip:

WILLIAM, CHATLOS III

LONGWOOD, FL 32750

601 SILVER BIRCH PLACE

SIGNATURE: WILLIAM J CHATLOS **PRES** 02/11/2009

CHATLOS, JANET

201 RIVERVIEW DRIVE

WINTER SPRINGS, FL 32708

Name:

Address:

City-St-Zip: