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Jul 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000004837 (1)

1. Corporation Name

CHATEAU COMMUNITIES, INC.

Principal Place of Business

10800 HALL ROAD
CLINTON TOWNSHIP MI 48038-1477
6430 So. QUEBEC
EVANSTON, CO 80111

Mailing Address

10800 HALL ROAD
CLINTON TOWNSHIP MI 48038-5317
6430 So. QUEBEC
EVANSTON, CO 80111

2. Principal Place of Business

21 6430 So. QUEBEC

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 6430 So. QUEBEC

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

10/22/1993

3a. Date of Last Report

02/23/1996

4. FEI Number

38-3132038

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~CHAIRMAN OF BOARD~~ ☐ DELETE

NAME BOLL, JOHN A
STREET ADDRESS 19500 HALL ROAD
CITY-ST-ZIP CLINTON TOWNSHIP MI 48038-1477

TITLE ~~DR. PRESIDENT/DIRECTOR~~ ☐ DELETE

NAME KELLOGG, C.G.
STREET ADDRESS ~~10800 HALL ROAD~~ 6430 So. QUEBEC
CITY-ST-ZIP CLINTON TOWNSHIP MI 48038-1477 EVANSTON, CO

TITLE ~~V. CORPORATE SECRETARY~~ ☐ DELETE

NAME FISCHER, TAMARA D
STREET ADDRESS ~~10800 HALL ROAD~~ 6430 So. QUEBEC
CITY-ST-ZIP CLINTON TOWNSHIP MI 48038-1477 EVANSTON, CO

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE GEO, DIRECTOR ☒ Change ☒ Addition

1.2 NAME GARY P. MODANIEL
1.3 STREET ADDRESS 6430 So. QUEBEC
1.4 CITY-ST-ZIP EVANSTON, CO 80111

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE

2-2-97 6430 So. QUEBEC

CR2E034 (9/96)