

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005085

FILED
Apr 14, 2009
Secretary of State

Entity Name: CHASE PRESERVE OF LELY RESORT NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

SANDCASTLE COMMUNITY MGMT.
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

SANDCASTLE COMMUNITY MGMT.
P.O. BOX 8478
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 65-1087221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE ARMOS, EDUARDO
C/O SANDCASTLE COMM. MGMT. INC.
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

DE ARMAS, EDUARDO
C/O SANDCASTLE COMM. MGMT. INC.
1719 TRADE CENTER WAY #4
NAPLES, FL 34109 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: EDUARDO DE ARMAS

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BASCH, TERRY
Address: 8555 CHASE PRESERVE DRIVE
City-St-Zip: NAPLES, FL 34113

Title: VPT () Delete
Name: PLUM, TIM
Address: 8487 CHASE PRESERVE DRIVE
City-St-Zip: NAPLES, FL 34113

Title: VS () Delete
Name: WILKINS, PHILIP
Address: 8550 CHASE PRESERVE DR
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BASCH, TERRANCE C
Address: 8555 CHASE PRESERVE DRIVE
City-St-Zip: NAPLES, FL 34113

Title: VPTD (X) Change () Addition
Name: KARAS, RICHARD
Address: 8570 CHASE PRESERVE DRIVE
City-St-Zip: NAPLES, FL 34113

Title: VPSD (X) Change () Addition
Name: WILKINS, PHILIP
Address: 8550 CHASE PRESERVE DR
City-St-Zip: NAPLES, FL 34113

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.

SIGNATURE: TERRANCE BASCH

PD

04/14/2009

Electronic Signature of Signing Officer or Director

Date