

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006385

FILED
Apr 28, 2006
Secretary of State

Entity Name: CHAPEL PINES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10033 DR. M. L. KING JR. STREET NORTH
SECOND FLOOR
ST. PETERSBURG, FL 33716

New Principal Place of Business:

9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702

Current Mailing Address:

10033 DR. M. L. KING JR. STREET NORTH
SECOND FLOOR
ST. PETERSBURG, FL 33716

New Mailing Address:

9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702

FEI Number: 69-0011066

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTERILL, RONALD P.A.
400 N. TAMPA ST., STE.2625
TAMPA, FL 336024793 US

Name and Address of New Registered Agent:

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:

Title: DP () Delete
Name: RYAN, JOHN
Address: 2502 N. ROCKY POINT DRIVE #1050
City-St-Zip: TAMPA, FL 33607

Title: VTD () Delete
Name: RAY, PAUL
Address: 2502 N. ROCKY POINT DRIVE #1050
City-St-Zip: TAMPA, FL 33607

Title: DS () Delete
Name: DUFFEY, ANNE
Address: 2502 N. ROCKY POINT DRIVE #1050
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RYAN, JOHN
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

Title: TD (X) Change () Addition
Name: RAY, PAUL
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

Title: VPD (X) Change () Addition
Name: LAWSON, MICHAEL
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN RYAN

PD

04/28/2006

Electronic Signature of Signing Officer or Director

Date