FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 FEB 23 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01503 (4)

1. Corporation Name
CHASEWOOD NORTH PROPERTY OWNERS' ASSOCIATION, IN C.

Principal Place of Business	Mailing Address
6539 CHASEWOOD DR JUPITER FL 33458 US	6539 CHASEWOOD DR JUPITER FL 33458 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/17/1984
3a. Date of Last Report: 03/31/1994
4. FEI Number: 59-2443766 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) Country (30)

9. Name and Address of Current Registered Agent

WHITE, CHARLES R L.
725 N A1A
~~Suite 400~~ S 6102
JUPITER FL 33477

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 200001415232
-02/24/95--01105--017
84 City ****130.00 FL ****30.00 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD ☐ Change ☐ Addition
NAME	KOENEMUND, BERNHARD	1.2 NAME	TEPP, STUART
STREET ADDRESS	6520 E CHASEWOOD DR	1.3 STREET ADDRESS	6516-C CHASEWOOD DR.
CITY-ST-ZIP	JUPITER FL	1.4 CITY-ST-ZIP	JUPITER FL 33458
TITLE	D	2.1 TITLE	D ☐ Change ☐ Addition
NAME	ALLENANN, LOU	2.2 NAME	KOENEMUND BERNHARD
STREET ADDRESS	6516 D CHASEWOOD DR	2.3 STREET ADDRESS	10329 SANDY RUN
CITY-ST-ZIP	JUPITER FL	2.4 CITY-ST-ZIP	JUPITER, FL 33478
TITLE	VD	3.1 TITLE	D ☐ Change ☐ Addition
NAME	TEPP, STUART	3.2 NAME	SKAKANDY STEPHEN
STREET ADDRESS	6516-C CHASEWOOD DRIVE	3.3 STREET ADDRESS	6515-F CHASEWOOD DR.
CITY-ST-ZIP	JUPITER FL	3.4 CITY-ST-ZIP	JUPITER, FL 33458
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	KNECHT, ARTHUR	4.2 NAME	VP RUSSELL, LESTER
STREET ADDRESS	6504 A CHASEWOOD DR	4.3 STREET ADDRESS	6568-C CHASEWOOD DR
CITY-ST-ZIP	JUPITER FL	4.4 CITY-ST-ZIP	JUPITER, FL 33458
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Stuart Tepp Stuart Tepp 1/16/95 407-744-2677
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

601B48