2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2010
Secretary of State

DOCUMENT# N02000001797

Entity Name: COUNTRY CHASE RESIDENTIAL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

720 BROOKER CREEK BLVD. #206
OLDSMAR, FL 34677 US

New Principal Place of Business:

720 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677 US

Current Mailing Address:

720 BROOKER CREEK BLVD. #206
OLDSMAR, FL 34677 US

New Mailing Address:

720 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677 US

FEI Number: 01-0670523 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCANNAVINO, INC
720 BROOKER CREEK BLVD. #206
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

SCANNAVINO, INC
720 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677 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: _____ 02/18/2010
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD
Name: GONZALES, DOREEN
Address: 720 BROOKER CREEK BLVD. #206
City-St-Zip: OLDSMAR, FL 34677

Title: VPD
Name: BROWN, CHRISTINE M
Address: 720 BROOKER CREEK BLVD. #206
City-St-Zip: OLDSMAR, FL 34677

Title: STD
Name: MC RAE, SHARON
Address: 720 BROOKER CREEK BLVD. #206
City-St-Zip: OLDSMAR, FL 34677

I hereby 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 all other like empowered.

SIGNATURE: DOREEN GONZALES PD 02/18/2010
Electronic Signature of Signing Officer or Director — Date