2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# N05000001410

Entity Name: CHARTRES GARDENS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2909 GRAFTON DRIVE
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

2909 GRAFTON DRIVE
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 30-0147825 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PROPER-T MANAGEMENT INC.
2909 GRAFTON DRIVE
KISSIMMEE, FL 34741 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: SETIEN, BETTY
Address: 4112 HUNTERS PARK LANE
City-St-Zip: ORLANDO, FL 32837

Title: DSV ( ) Delete
Name: CAMACHO, SANDRA
Address: 4040 VIOSCA PLACE
City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete
Name: CADIZ, RAFAEL
Address: 4046 HUNTER PARK LANE
City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete
Name: AKSU, ADNAN
Address: 13836 BEAUREGARD PLACE
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: BETTY SETIEN DP 04/06/2009

Electronic Signature of Signing Officer or Director — Date