2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005774

FILED Apr 06, 2009 Secretary of State

Entity Name: COLLEGE CHASE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3725 PALM HARBOR BLVD 1600 WEST COLONIAL DRIVE

PALM HARBOR, FL 34683 ORLANDO, FL 32804

Current Mailing Address: New Mailing Address:

3527 PALM HARBOR BLVD PALM HARBOR, FL 34683

FEI Number: 20-4932062 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HANSON, JACK B MELROSE-SOVEREIGN COMPANIES 3527 PALM HARBOR BLVD PALM HARBOR, FL 34683 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:

·____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: REYNOLDS, NANCY Name: FOOTE, TERRY

 Address:
 12802 TAMPA OAKS BLVD STE 100
 Address:
 501 N CATTLEMAN RD #100

 City-St-Zip:
 TEMPLE TERRACE, FL 33637
 City-St-Zip:
 SARASOTA, FL 34232

Title: VP () Delete Title: VP (X) Change () Addition

Name: STOREY, MICHAEL Name: FROST, JASON

 Address:
 12802 TAMPA OAKS BLVD STE 100
 Address:
 501 N CATTLEMAN RD #100

 City-St-Zip:
 TEMPLE TERRACE, FL 33637
 City-St-Zip:
 SARASOTA, FL 34232

Title: S () Delete Title: S (X) Change () Addition

Name: WILMETH, RICK Name: WILMETH, RICK

 Address:
 12802 TAMPA OAKS BLVD STE 100
 Address:
 501 N CATTLEMAN RD #100

 City-St-Zip:
 TEMPLE TERRACE, FL 33637
 City-St-Zip:
 SARASOTA, FL 34232

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: BEVERLY MALOUIN LCAM 04/06/2009