2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# N05000007789

Entity Name: CHATEAU IN THE PINES HOMEOWNERS ASSOCIATION II, INC.

Current Principal Place of Business:

930 S. HARBOR CITY BLVD, SUITE 505
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

930 S. HARBOR CITY BLVD, SUITE 505
MELBOURNE, FL 32901

New Mailing Address:

1331 BEDFORD DRIVE
#103
MELBOURNE, FL 32940

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LABBATE, LETISHA
1331 BEDFORD DRIVE #103
MELBOURNE, FL 32940 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: PD ( ) Delete
Name: ATLAS, WINNIE
Address: 220 SIXTH AVE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VPD ( ) Delete
Name: MCDAVITT, LORINE
Address: 95 ANCHOR DR
City-St-Zip: INDIAN HBR. BCH, FL 32937

Title: STD ( ) Delete
Name: CONWAY, KATHLEEN
Address: 56 D PINEY BRANCH WAY
City-St-Zip: MELBOURNE, FL 32904

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:

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: LETISHA LABATTE RA 04/24/2008

Electronic Signature of Signing Officer or Director — Date