2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004287

FILED Jan 20, 2009 Secretary of State

Entity Name: CHATEAU DE VILLE OF TALLAHASSEE CONDOMINIUM ASSOCIATION, INC.

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

2020 CONTINENTAL AVENUE TALLAHASSEE, FL 32304

Current Mailing Address: New Mailing Address:

2020 CONTINENTAL AVENUE TALLAHASSEE, FL 32304

FEI Number: 20-4755141 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:

FULLER, DENNIS R 117 E. GEORGIA STREET TALLAHASSEE, FL 32301 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:
 D () Delete
 Title:
 RA (X) Change () Addition

 Name:
 FULLER, DENNIS
 Name:
 FULLER, DENNIS

 Address:
 117 E. GEORGIA STREET
 Address:
 117 E. GEORGIA STREET

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:
 TALLAHASSEE, FL 32301

Title: VTD () Delete Title: T (X) Change () Addition Name: ERICKSON, TOM Name: ERICKSON, TOM

Address: 2020 CONTINENTAL AVE. #106 Address: 2020 CONTINENTAL AVE. #106
City-St-Zip: TALLAHASSEE, FL 32304 City-St-Zip: TALLAHASSEE, FL 32304

Title: D/P () Delete Title: P (X) Change () Addition Name: REY, CHARLES Name: REY, CHARLES

Address: 2020 CONTINENTAL AVE, #237
City-St-Zip: TALLAHASSEE, FL 32304
Address: 2020 CONTINENTAL AVE, #237
City-St-Zip: TALLAHASSEE, FL 32304

Title: D,VP () Delete Title: VP (X) Change () Addition Name: RUMALA, RANDY Name: RAMALA, ZAIN

Address: 2020 CONTINENTAL AVE. #219 Address: 2020 CONTINENTAL AVE. #219
City-St-Zip: TALLAHASSEE, FL 32304 City-St-Zip: TALLAHASSEE, FL 32304

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

Name:MILLER, RANDYName:MILLER, RANDYAddress:1334 MILLSTREAM ROADAddress:1334 MILLSTREAM ROADCity-St-Zip:TALLAHASSEE, FL 32304City-St-Zip:TALLAHASSEE, FL 32304

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

 Name:
 HUTCHINSON, LINDA
 Name:

 Address:
 2020 CONTINENTAL AVE.
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32304
 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: DENNIS FULLER RA 01/20/2009