

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 20, 2007
Secretary of State

DOCUMENT# N06000004954

Entity Name: SANDLER CHASE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**11945 SAN JOSE BLVD.
BLDG. 300
JACKSONVILLE, FL 32223**New Principal Place of Business:**5851 TIMUQUANA ROAD
SUITE 301
JACKSONVILLE, FL 32210**Current Mailing Address:**11945 SAN JOSE BLVD.
BLDG. 300
JACKSONVILLE, FL 32223**New Mailing Address:**5851 TIMUQUANA ROAD
SUITE 301
JACKSONVILLE, FL 32210**FEI Number:** 20-8947951**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DONNELLY, KEITH
11945 SAN JOSE BLVD.
BLDG. 300
JACKSONVILLE, FL 32223 US**Name and Address of New Registered Agent:**ATLEE, KENYON S
5851 TIMUQUANA ROAD
SUITE 301
JACKSONVILLE, FL 32210 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: KENYON S. ATLEE

07/20/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REYNOLDS, GLEN
Address: 11945 SAN JOSE BLVD. BLDG. 300
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP () Delete
Name: DONNELLY, KEITH
Address: 11945 SAN JOSE BLVD. BLDG. 300
City-St-Zip: JACKSONVILLE, FL 32223

Title: S/T () Delete
Name: DEMOTT, DENNIS
Address: 11945 SAN JOSE BLVD. BLDG. 300
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: ATLEE, KENYON S D/P
Address: 5851 TIMUQUANA ROAD, SUITE 301
City-St-Zip: JACKSONVILLE, FL 32210

Title: D/VP (X) Change () Addition
Name: BRADFORD, ERIC D/VP/T
Address: 5851 TIMUQUANA ROAD, 301
City-St-Zip: JACKSONVILLE, FL 32210

Title: D/S (X) Change () Addition
Name: MOUNTAIN, DONNA D/S
Address: 5851 TIMUQUANA ROAD, SUITE 301
City-St-Zip: JACKSONVILLE, FL 32210

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: KENYON S ATLEE

P/D

07/20/2007

Electronic Signature of Signing Officer or Director

Date