

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 16, 2009**  
**Secretary of State**

DOCUMENT# N07000001494

**Entity Name:** THE CHAPMAN COVE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**3100 CLAY AVENUE, SUITE 275  
ORLANDO, FL 32804**New Principal Place of Business:**882 JACKSON AVENUE  
WINTER PARK, FL 32789**Current Mailing Address:**3100 CLAY AVENUE, SUITE 275  
ORLANDO, FL 32804**New Mailing Address:**882 JACKSON AVENUE  
WINTER PARK, FL 32789**FEI Number:** 20-8947517**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**F&L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 322025017 US**Name and Address of New Registered Agent:**JORDAN, BRETT M  
882 JACKSON AVENUE  
WINTER PARK, FL 32789 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: BRETT M. JORDAN

10/16/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KRAMER, STUART A  
Address: 3100 CLAY AVENUE, SUITE 275  
City-St-Zip: ORLANDO, FL 32804

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: INGRAM, WALLACE  
Address: 5850 T.G. LEE BLVD. SUITE 600  
City-St-Zip: ORLANDO, FL 32822

Title: VPD ( ) Change (X) Addition  
Name: MAHON, CHRISTINA  
Address: 5850 T.G. LEE BLVD. SUITE 600  
City-St-Zip: ORLANDO, FL 32822

Title: STD ( ) Change (X) Addition  
Name: LAWSON, ROB  
Address: 5850 T.G. LEE BLVD. SUITE 600  
City-St-Zip: ORLANDO, FL 32822

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: BRETT M. JORDAN

AGEN

10/16/2009

Electronic Signature of Signing Officer or Director

Date