

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003347

FILED  
Jan 24, 2009  
Secretary of State

Entity Name: CHANDLER HILLS LADIES GOLF ASSOCIATION INC.

**Current Principal Place of Business:**

8139 SW 90TH TERRACE ROAD  
OCALA, FL 34481

**New Principal Place of Business:**

**Current Mailing Address:**

8719 SW 83RD CIRCLE  
OCALA, FL 34481

**New Mailing Address:**

8647 SW 83RD CIRCLE  
OCALA, FL 34481

FEI Number: 30-0413597

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WARE, PATRICIA  
8439 SW 82ND LOOP  
OCALA, FL 34481 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: PRES ( ) Delete  
Name: WARE, PATRICIA  
Address: 8439 SW82ND LOOP  
City-St-Zip: OCALA, FL 34481

Title: VP ( ) Delete  
Name: HEWES, NADINE  
Address: 8339 SW 84TH PLACE  
City-St-Zip: OCALA, FL 34481

Title: SECR ( ) Delete  
Name: RONEY, JO ANN  
Address: 8719 SW 83RD CIRCLE  
City-St-Zip: OCALA, FL 34481

Title: TRES ( ) Delete  
Name: COWIE, MARGE  
Address: 7962 SW 83RD PLACE  
City-St-Zip: OCALA, FL 34481

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: FRATARANGELO, ANDREA  
Address: 8790 SW 82ND COURT RD  
City-St-Zip: OCALA, FL 34481

Title: SECR (X) Change ( ) Addition  
Name: CLARK, CAROL  
Address: 8600 SW 86TH CIR  
City-St-Zip: OCALA, FL 34481

Title: TRES (X) Change ( ) Addition  
Name: BUSCHUR, LINDA  
Address: 8647 SW 83RD CIR  
City-St-Zip: OCALA, FL 34481

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: LINDA BUSCHUR

T

01/24/2009

Electronic Signature of Signing Officer or Director

Date