

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08159

FILED
Feb 18, 2009
Secretary of State

Entity Name: CHARTER MILL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5207 PINE MILL CT.
TAMPA, FL 33617 US

New Principal Place of Business:

REALMANAGE
4902 EISENHOWER BLVD, SUITE 216
TAMPA, FL 33634 US

Current Mailing Address:

550 N REO STREET
SUITE 300
TAMPA, FL 33609 US

New Mailing Address:

REALMANAGE
4902 EISENHOWER BLVD, SUITE 216
TAMPA, FL 33634 US

FEI Number: 59-2578263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REAL MANAGE LLC
550 N REO STREET
SUITE 300
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

MYERS, WADE
REALMANAGE
4902 EISENHOWER BLVD, SUITE 216
TAMPA, FL 33634 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: WADE MYERS

02/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STONE, CAROLYN
Address: 5204 PINE MILL COURT
City-St-Zip: TAMPA, FL 33617

Title: VP () Delete
Name: POPE, BEVERLY
Address: 5210 PINE MILL COURT
City-St-Zip: TAMPA, FL 33617

Title: SD () Delete
Name: MAHAFFEY, LANE
Address: 5202 PINE MILL COURT
City-St-Zip: TAMPA, FL 33617

Title: D () Delete
Name: THOMPSON, GAIL
Address: 5215 PINE MILL COURT
City-St-Zip: TAMPA, FL 33617

Title: TD () Delete
Name: TROMMER, JEFFREY
Address: 5211 PINE MILL COURT
City-St-Zip: TAMPA, FL 33617

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:

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: CAROLYN STONE

P

02/18/2009

Electronic Signature of Signing Officer or Director

Date