

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2008 8:00 am
Secretary of State

07-18-2008 90015 033 ****61.25

DOCUMENT # N14004 1. Entity Name CHARTLEY COURT HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 308 N CHARTLEY CT 293 CHARTLEY COURT SOUTH SARASOTA, FL 34232 US			Mailing Address C/O ADI PROPERTY MGT 63 SARASOTA CENTER BLVD SUITE 104 SARASOTA, FL 34240 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address Prokop P.A.		<div style="font-size: 24px; font-weight: bold; margin-bottom: 10px;">60045144</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> 07092008 Chg-NP CR2E037 (12/06) </div>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 3707 Radnor Place			
City & State		City & State Sarasota, FL 34232			
Zip	Country	Zip 34232	Country U.S.		
4. FEI Number 59-2729719				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
ADI PROPERTY MANAGEMENT 63 SARASOTA CENTER BLVD SUITE 104 SARASOTA, FL 34240			Name Prokop P.A. Street Address (P.O. Box Number is Not Acceptable) 3707 Radnor St. City Sarasota FL Zip Code 34232		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Kenneth D. Prokop <small>Signature, typed or printed name of registered agent and title if applicable</small>			DATE 7/9/08 <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ADI PROPERTY MANAGEMENT 63 SARASOTA CENTER BLVD SARASOTA, FL 34240	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Jeff merckle 456 Chartley Court South Sarasota, FL 34232	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SPEED, BARBARA 226 CHARTLEY COURT NORTH SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP June Parker 267 Chartley Court North Sarasota, FL 34232	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NANNY, LESLIE 293 CHARTLEY CT NORTH SARASOTA, FL 34232	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC Cindy Emshoff 294 Chartley Court North Sarasota, FL 34232	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACKENZIE, ROSE 285 CHARTLEY COURT NORTH SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR Frances Pollock 425 Chartley Court South Sarasota, FL 34232	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR Frances Pollock	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Jeff Merckle <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			DATE 7/12/08 302-1009 <small>Date Daytime Phone #</small>		