2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20658

FILED Feb 04, 2007 Secretary of State

Entity Name: CHICKASAW OAKS PHASE FIVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 5401 S KIRKMAN RD 860 N. ORANGE AVE. ORLANDO, FL 32819 US SUITE B ORLANDO, FL 32801 US **Current Mailing Address:** New Mailing Address: 5401 S KIRKMAN RD 860 N. ORANGE AVE. SUITE B ORLANDO, FL 32819 US ORLANDO, FL 32801 US FEI Number: 59-2814179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: COMMUNITY MGMT PROFESSIONALS, INC ORLANDO EQUITY 5401 S KIRKMAN RD 860 N. ORANGE AVE. STE 450 SUITE B ORLANDO, FL 32819 US ORLANDO, FL 32801 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: BRIDGETTE ROSS PA 02/04/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: T/D () Delete (X) Change () Addition ADCOCK, CINDY MAK, MONA Name: Name: 4914 RED BAY DR. Address: 860 N. ORANGE AVE STE B Address: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32829 City-St-Zip: Title: P/D () Delete Title: V/D (X) Change () Addition JENSEN, ERICK M Name: FADDIS, SHELBY Name: Address: 8609 GRANDEE DR Address: 860 N. ORANGE AVE. STE B City-St-Zip: ORLANDO, FL 32829 City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: T/D () Change (X) Addition RUSSETT, BRENDA Name: Name: 860 N. ORANGE AVE. STE B Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: S/D () Change (X) Addition SWOSZOWSKI, NOREEN Name: Name: 860 N. ORANGE AVE. STE B Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: () Change (X) Addition ALVARADO, WILLIAM Name: Name: 860 N. ORANGE AVE. STE B Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: () Change (X) Addition D'ARCY, MIKE Name: Name: Address: Address: 860 N. ORANGE AVE., STE B ORLANDO, FL 32801 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MONA MAK P/D 02/04/2007