


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90065 012 ****61.25

DOCUMENT # N20696 1. Entity Name CHIMNEY CREEK ASSOCIATION, INC.					
Principal Place of Business 1891 CHIMNEY CREEK PL SARASOTA, FL 34235 US			Mailing Address P.O BOX 51042 SARASOTA, FL 34232 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
EDWARDS, KEVIN C 630 S. ORANGE AVE SARASOTA, FL 34236			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		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	P <input type="checkbox"/> Delete	TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	PEREIRA, ED	NAME	DONALD BIRD		
STREET ADDRESS	4513 CHIMNEY CRK DR.	STREET ADDRESS	4406 CHIMNEY CREEK DR.		
CITY-ST-ZIP	SARASOTA, FL 34235	CITY-ST-ZIP	SARASOTA, FL 34235		
TITLE	V <input checked="" type="checkbox"/> Delete	TITLE	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	YODER, MILLARD	NAME	JOYCE P. RILEY		
STREET ADDRESS	4525 CHIMNEY CREEK DR.	STREET ADDRESS	4513 CHIMNEY CREEK DR.		
CITY-ST-ZIP	SARASOTA, FL 34235	CITY-ST-ZIP	SARASOTA, FL 34235		
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	KROEPFL, GRACE	NAME	ALICE HUDEC		
STREET ADDRESS	4509 CHIMNEY CRK DR.	STREET ADDRESS	4418 CHIMNEY CREEK DR.		
CITY-ST-ZIP	SARASOTA, FL 34235	CITY-ST-ZIP	SARASOTA, FL 34235		
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	WESTBROCK, JACKIE	NAME	CHERI LEIBERICK		
STREET ADDRESS	1866 CHIMNEY CRK PL	STREET ADDRESS	1876 CHIMNEY CREEK PL.		
CITY-ST-ZIP	SARASOTA, FL 34235	CITY-ST-ZIP	SARASOTA, FL 34235		
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	HAND, BONNIE	NAME	KATHLEEN BIRD		
STREET ADDRESS	1884 CHIMNEY CREEK PL	STREET ADDRESS	4406 CHIMNEY CREEK DR.		
CITY-ST-ZIP	SARASOTA, FL 34235	CITY-ST-ZIP	SARASOTA, FL 34235		
TITLE	T <input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	MASS, JUDY	NAME	MARSHALL REY		
STREET ADDRESS	4522 CHIMNEY CREEK DR.	STREET ADDRESS	4537 CHIMNEY CREEK DR.		
CITY-ST-ZIP	SARASOTA, FL 34235	CITY-ST-ZIP	SARASOTA, FL 34235		
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: Joyce P. Riley JOYCE P RILEY 2/22/07 (941)371-6833 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					