2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2009
Secretary of State

DOCUMENT# N22385

Entity Name: CHELSEA WOODS PHASE II HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P O BOX 283
SAFETY HARBOR, FL 34695

New Principal Place of Business:

2817 CHANCERY LANE
CLEARWATER, FL 33759

Current Mailing Address:

P O BOX 283
SAFETY HARBOR, FL 34695

New Mailing Address:

FEI Number: 59-2883567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KATZEN, JOYCE M
2817 CHANCERY LANE
CLEARWATER, FL 33759 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: TD ( ) Delete
Name: KATZEN, JOYCE
Address: 2817 CHANCERY LANE
City-St-Zip: CLEARWATER, FL 33759

Title: P ( ) Delete
Name: SCHULTZ, DUANE
Address: 2805 CHANERY LANE
City-St-Zip: CLEARWATER, FL 33759

Title: S ( ) Delete
Name: HAZLITT, CATHY
Address: 2818 CHANERY LANE
City-St-Zip: CLEARWATER, FL 33759

Title: V ( ) Delete
Name: ROHMAN, GIGI
Address: 2801 CHANCERY LN
City-St-Zip: CLEARWATER, FL 33759

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:

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: JOYCE M. KATZEN TREA 01/28/2009

Electronic Signature of Signing Officer or Director — Date