2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# N24024

Entity Name: CHADHAM BY THE SEA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O MORBITZER COMMUNITIES, INC
444 SEABREEZE BLVD #645
DAYTONA BEACH, FL 32118

New Principal Place of Business:

Current Mailing Address:

C/O MORBITZER COMMUNITIES, INC
444 SEABREEZE BLVD #645
DAYTONA BEACH, FL 32118

New Mailing Address:

FEI Number: 59-3066644 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORBITZER, MARGARET L
C/O MORBITZER COMMUNITIES, INC
444 SEABREEZE BLVD #645
DAYTONA BEACH, FL 32118 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: T ( ) Delete
Name: BARBER, GENE
Address: 115 ROBINSON COURT, STE A
City-St-Zip: FAYETTEVILLE, GA 30214

Title: P ( ) Delete
Name: CARLSON, KEN
Address: 3429 PERSHING AVE
City-St-Zip: ORLANDO, FL 32812

Title: VP ( ) Delete
Name: KIRKLAND, GORDON
Address: 2700 LAKESHORE DR
City-St-Zip: ORLANDO, FL 32803

Title: S ( ) Delete
Name: HILL, MARK
Address: 906 ALHAMBRA COURT
City-St-Zip: ORLANDO, FL 32804

Title: D ( ) Delete
Name: FUNK, JACK
Address: 1904 LAKE ALMA DR
City-St-Zip: APOPKA, FL 32712

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: KEN CARLSON P 04/18/2008
Electronic Signature of Signing Officer or Director — Date