2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# N28534

Entity Name: CHANTECLAIR MAISONETTES OF PELICAN BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

SW PROPERTY MANAGEMENT CORP
1044 CASTELLO DR #206
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

SW PROPERTY MANAGEMENT CORP
1044 CASTELLO DR #206
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 65-0102470 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOUTHWEST PROPERTY MANAGEMENT
1044 CASTELLO DR #206
NAPLES, FL 34103 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: VD ( ) Delete
Name: SANCHEZ, BILL
Address: 5898 CHANTECLAIR DR #212
City-St-Zip: NAPLES, FL 34108

Title: PD ( ) Delete
Name: BLUMEYER, FRANK
Address: 5895 CHANTECLAIR DR. #121
City-St-Zip: NAPLES, FL 34108

Title: STD ( ) Delete
Name: GERALD, HACKETT
Address: 5895 CHANTECLAIR DRIVE
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: DUARTE, DICK
Address: 5899 CHANTECLAIR DR #225
City-St-Zip: NAPLES, FL 34108

Title: VP (X) Change ( ) Addition
Name: KARLSEN, ANN
Address: 5898 CHANTECLAIR DR. #411
City-St-Zip: NAPLES, FL 34108

Title: STD (X) Change ( ) Addition
Name: PARKER, GRAHAM
Address: 5899 CHANTECLAIR DRIVE, #221
City-St-Zip: NAPLES, FL 34108

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: DICK DUARTE PD 03/31/2009

Electronic Signature of Signing Officer or Director — Date