

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30147

FILED
Apr 20, 2010
Secretary of State

Entity Name: CHALFONT HEIGHTS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8413 SAINT GILES CT.
ZEPHYRHILLS, FL 33541

New Principal Place of Business:

8419 SAINT GILES CT.
ZEPHYRHILLS, FL 33541

Current Mailing Address:

8413 SAINT GILES CT.
ZEPHYRHILLS, FL 33541

New Mailing Address:

8419 SAINT GILES CT.
ZEPHYRHILLS, FL 33541

FEI Number: 04-3767543

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIS, CYNTHIA A
8413 SAINT GILES CT.
ZEPHYRHILLS, FL 33541 US

Name and Address of New Registered Agent:

TOOLE, PAMELA A
8419 SAINT GILES CT.
ZEPHYRHILLS, FL 33541 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: PAMELA TOOLE

04/20/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SWEENEY, RODNEY
Address: 8408 SAINT GILES CT.
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VD
Name: JUDGE, CATHERINE
Address: 8419 SAINT GILES CT.
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: STD
Name: TOOLE, PAMELA
Address: 8419 SAINT GILES CT.
City-St-Zip: ZEPHYRHILLS, FL 33541

I hereby 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 all other like empowered.

SIGNATURE: PAMELA TOOLE

STD

04/20/2010

Electronic Signature of Signing Officer or Director

Date