

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33680

FILED
Mar 13, 2009
Secretary of State

Entity Name: CHANTI-CLARE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11981 SW 144 CT
201
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

11981 SW 144 CT
201
MIAMI, FL 33186

New Mailing Address:

FEI Number: 65-0239463 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAIGE, ROBERT E ESQ.
9500 S. DADELAND BLVD.
STE. 550
MIAMI, FL 33156 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: P () Delete
Name: JUSTUS, CRYSTAL
Address: 24931 SW 129 CT
City-St-Zip: HOMESTEAD, FL 33032

Title: VSD () Delete
Name: LARUE, WILLIAM
Address: 25100 SW 129TH PLACE
City-St-Zip: HOMESTEAD, FL 33032

Title: TD () Delete
Name: TOMPKINS, TERRY
Address: 24961 SW 129TH CT.
City-St-Zip: HOMESTEAD, FL 33032

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JUSTUS, CRYSTAL
Address: 24931 SW 129 CT
City-St-Zip: HOMESTEAD, FL 33032

Title: SD (X) Change () Addition
Name: LARUE, WILLIAM
Address: 25100 SW 129TH PLACE
City-St-Zip: HOMESTEAD, FL 33032

Title: D (X) Change () Addition
Name: TOMPKINS, TERRY
Address: 24961 SW 129TH CT.
City-St-Zip: HOMESTEAD, FL 33032

Title: DVP () Change (X) Addition
Name: O'FARRIL, JORGE
Address: 25101 S.W. 129 CT
City-St-Zip: HOMESTEAD, FL 33032

Title: DT () Change (X) Addition
Name: LEAMON, SUSAN
Address: 12943 S.W. 251 ST
City-St-Zip: HOMESTEAD, FL 33032

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: CRYSTAL JUSTUS

PD

03/13/2009

Electronic Signature of Signing Officer or Director

_____ Date