

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34464

FILED
Mar 31, 2009
Secretary of State

Entity Name: CHAPEL POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O CENTURY MANAGEMENT SERVICES, INC.
12233 SW 55TH STREET, 811
COOPER CITY, FL 33330 US

New Principal Place of Business:

C/O CENTURY MANAGEMENT SERVICES, INC.
1495 N PARK DRIVE
WESTON, FL 33326 US

Current Mailing Address:

C/O CENTURY MANAGEMENT SERVICES, INC.
12233 SW 55TH STREET, 811
COOPER CITY, FL 33330 US

New Mailing Address:

C/O CENTURY MANAGEMENT SERVICES, INC.
1495 N PARK DRIVE
WESTON, FL 33326 US

FEI Number: 65-0191361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZMAN GARFINKEL, P.A.
1501 N.W. 49TH ST.
SUITE 202
FT. LAUDERDALE, FL 33309 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: PEARCE, JOHN
Address: 20601 NW 8 ST.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: S () Delete
Name: PALMA, HOPE
Address: 20710 NW 5 ST
City-St-Zip: HOLLYWOOD, FL 33029

Title: VP () Delete
Name: DRANG, STEFFANY
Address: 20621 NW 8 ST
City-St-Zip: PEMBROKE PINES, FL 33029

Title: T () Delete
Name: WILSON, RAYMOND
Address: 510 NW 207TH TERR.
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PEARCE, JOHN
Address: 1495 N PARK DRIVE
City-St-Zip: WESTON, FL 33326

Title: S (X) Change () Addition
Name: PALMA, HOPE
Address: 1495 N PARK DRIVE
City-St-Zip: WESTON, FL 33326

Title: VP (X) Change () Addition
Name: DRANG, STEFFANY
Address: 1495 N PARK DRIVE
City-St-Zip: WESTON, FL 33326

Title: T (X) Change () Addition
Name: WILSON, RAYMOND
Address: 1495 N PARK DRIVE
City-St-Zip: WESTON, FL 33326

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: JOHN PEARCE

PRES

03/31/2009

Electronic Signature of Signing Officer or Director

Date