

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35507

FILED  
Mar 27, 2007  
Secretary of State

**Entity Name:** CHICKASAW TRAILS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PRESIDENTIAL GROUP SOUTH  
135 W. PINEVIEN ST  
ALTAMONTE SPRINGS, FL 32714 US

**New Principal Place of Business:**

225 S. WESTMONTE DRIVE  
#3310  
ALTAMONTE SPRINGS, FL 32714 US

**Current Mailing Address:**

PRESIDENTIAL GROUP SOUTH  
135 W. PINEVIEN ST  
ALTAMONTE SPRINGS, FL 32714 US

**New Mailing Address:**

P.O. BOX 162147  
ALTAMONTE SPRINGS, FL 32716 US

**FEI Number:** 59-2994534

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PRESIDENTIAL GROUP SOUTH, INC.  
135 W. PINEVIEW ST.  
ALTAMONTE SPRINGS, FL 32714 US

**Name and Address of New Registered Agent:**

WOMACK, ELLEN R  
225 S. WESTMONTE DRIVE  
SUITE 3310  
ALTAMONTE SPRINGS, FL 32714 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: ELLEN R. WOMACK

03/27/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GUINN, JOHN  
Address: 3866 RUNNING WATER DR  
City-St-Zip: ORLANDO, FL 32829

Title: D ( ) Delete  
Name: BECK, AUGUSTINE T  
Address: 3715 PEACE PIPE DR.  
City-St-Zip: ORLANDO, FL 32829 US

Title: SD ( ) Delete  
Name: ADAMS, MARK  
Address: 8695 BLACK MESA DR  
City-St-Zip: ORLANDO, FL 32829

Title: D ( ) Delete  
Name: RIVERA, ARCUDIO  
Address: 3727 RUNNING WATER DR  
City-St-Zip: ORLANDO, FL 32829

Title: VPD ( ) Delete  
Name: VELEZ, RICHARD  
Address: 3490 FOX HOLLOW DR  
City-St-Zip: ORLANDO, FL 32829

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: BECK, AUGUSTINE T  
Address: 3715 PEACE PIPE DR.  
City-St-Zip: ORLANDO, FL 32829 US

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 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: ELLEN R. WOMACK

A

03/27/2007

Electronic Signature of Signing Officer or Director

Date