2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36096

FILED Jan 04, 2005 Secretary of State

Entity Name: CHALFONT VILLAS ADULT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4741 SILVER CIRCLE ZEPHYRHILLS, FL 33541

Current Mailing Address: New Mailing Address:

4741 SILVER CIRCLE ZEPHYRHILLS, FL 33541

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

ZEPHYRHILLS, FL 33541 US 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: MELANIE THRASHER 01/04/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: PETERS, HENRY Name: ABERCROMBIE, FREDA

Address: 4718 SILVER CIRCLE Address: 4769 SILVER CIRCLE
City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VD () Delete Title: VD (X) Change () Addition Name: THRASHER, MELANIE Name: LARNER, ROGER

Address: 4715 SILVER CIRCLE Address: 4749 SILVER CIRCLE
City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: ZEPHYRHILLS, FL 33541

Title: S () Delete Title: S (X) Change () Addition

 Name:
 ELLIS, KIM
 Name:
 HANSEN, SUSAN

 Address:
 4704 SILVER CIRCLE
 Address:
 4779 SILVER CIRCLE

 City-St-Zip:
 ZEPHYRHILLS, FL 33541
 City-St-Zip:
 ZEPHYRHILLS, FL 33541

 Name:
 SPURLING, BLAINE
 Name:
 ELDER, DEBBIE

 Address:
 4739 SILVER CIRCLE
 4770 SILVER CIRCLE

 City-St-Zip:
 ZEPHYRHILLS, FL 33541
 City-St-Zip:
 ZEPHYRHILLS, FL 33541

 Name:
 PERRY, JAMES
 Name:
 THRASHER, MELANIE

 Address:
 4700 SILVER CIRCLE
 Address:
 4715 SILVER CIRCLE

 City-St-Zip:
 ZEPHYRHILLS, FL 33541
 City-St-Zip:
 ZEPHYRHILLS, FL 33541

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MELANIE THRASHER TD 01/04/2005