

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41236

FILED
Mar 31, 2010
Secretary of State

Entity Name: CHASE GROVES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

225 S WESTMONTE DRIVE
STE 3310
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

P.O. BOX 162147
ALTAMONTE SPRINGS, FL 327162147 US

New Principal Place of Business:

225 S WESTMONTE DR
STE #3310
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

PO BOX 162147
ALTAMONTE SPRINGS, FL 32716 US

FEI Number: 59-3041796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOMACK, ELLEN R
225 S WESTMONTE DRIVE
STE 3310
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

VISTA COMMUNITY ASSOCIATION MANAGEMENT, IN
225 S WESTMONTE DR
#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

03/31/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DV
Name: TORO, LUIS
Address: 906 DELFINO PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: D
Name: HARRIS, CHRISTOPHER
Address: 844 DELFINO PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: D
Name: SWIATEK, JEFFREY
Address: 918 DELFINO PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: DP
Name: SULLIVAN, SHARON
Address: 290 ALDRUP WAY
City-St-Zip: LAKE MARY, FL 32746

Title: DT
Name: DEINZER, PETER
Address: 947 DELFINO PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: DS
Name: STOKES, CATHY
Address: 2547 ABACUS COURT
City-St-Zip: LAKE MARY, FL 32746

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: SHARON SULLIVAN

DP

03/31/2010

Electronic Signature of Signing Officer or Director

Date