

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 02 1997 8:00am
Secretary of State

DOCUMENT # N41527

1. Corporation Name

Chesapeake Point Mobile Court Homeowners
Association, Inc.

Principal Place of Business

Mailing Address

Chesapeake Point Mobile Court
800 Chesapeake Dr. # 8
Tarpon Springs, FL. 34689

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Incorporated or Qualified

12-18-90

3a. Date of Last Report

2-5-96

4. FEI Number

59-3045926

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Allen C. Badger
800 Chesapeake Dr. #18
Tarpon Springs, FL. 34689

81. Name

Edwin M. Cooney

82. Street Address (P.O. Box Number is Not Acceptable)

800 Chesapeake Dr. # 8

83.

84. City

Tarpon Springs

FL

85. Zip Code

34689

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

EDWIN M. COONEY PRES. Edwin M. Cooney

3/5/97

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

President

☒ DELETE

NAME

James Oexman

STREET ADDRESS

898 Chesapeake Dr. # 8

CITY-ST-ZIP

Tarpon Springs, FL. 34689

TITLE

1st Vice President

☒ DELETE

NAME

Christopher Banks

STREET ADDRESS

800 Chesapeake Dr. #10

CITY-ST-ZIP

Tarpon Springs, FL. 34689

TITLE

2nd Vice President

☒ DELETE

NAME

Milton Lewis

STREET ADDRESS

800 Chesapeake Dr. # 3

CITY-ST-ZIP

Tarpon Springs, FL. 34689

TITLE

Treasurer

☒ DELETE

NAME

Carolyn Drury

STREET ADDRESS

800 Chesapeake Dr. # 33

CITY-ST-ZIP

Tarpon Springs, FL. 34689

TITLE

SAME

☐ DELETE

NAME

SAME

STREET ADDRESS

SAME

CITY-ST-ZIP

SAME

TITLE

SAME

☐ DELETE

NAME

SAME

STREET ADDRESS

SAME

CITY-ST-ZIP

SAME

11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-ST-ZIP

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-ST-ZIP

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-ST-ZIP

President

Edwin M. Cooney

800 Chesapeake Dr. # 8

Tarpon Springs, FL. 34689

1st Vice President

Frank Bubb

800 Chesapeake Dr. # 48

Tarpon Springs, FL. 34689

2nd Vice President

Christopher Banks

800 Chesapeake Dr. # 10

Tarpon Springs, FL. 34689

Treasurer

June Ertle

800 Chesapeake Dr. # 23

Tarpon Springs, FL. 34689

Secretary

Martha Kietzmann

800 Chesapeake Dr. # 29

Tarpon Springs, FL. 34689

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***70.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Edwin M. Cooney

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-5-97

Date

1-813-938-2659

Daytime Phone #

CR2E037 (9/96)