

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41567

FILED
Jan 07, 2009
Secretary of State

Entity Name: CHATHAM PARK HOME OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

101 PARK PLACE BLVD.
SUITE 2
KISSIMMEE, FL 34741 US

New Principal Place of Business:

Current Mailing Address:

101 PARK PLACE BLVD.
SUITE 2
KISSIMMEE, FL 34741 US

New Mailing Address:

FEI Number: 59-3049872 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ASSOCIATION MGMT., GRP OF CNTRL FL, INC.
101 PARK PLACE BLVD.
SUITE 2
KISSIMMEE, FL 34741 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: VPD () Delete
Name: PINNEL, TOM
Address: 2651 CHATHAM CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: PD () Delete
Name: BAGLEY, MIKE
Address: 2591 CHATHAM CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: D () Delete
Name: SANTOS, JOSE
Address: 2613 BROOKSHIRE CT
City-St-Zip: KISSIMMEE, FL 34746

Title: STD () Delete
Name: SANTOS, BEATRICE
Address: 2613 BROOKSHIRE CT.
City-St-Zip: KISSIMMEE, FL 34746

Title: D () Delete
Name: DEL PEURTO, OMAR
Address: 4908 MONARCH LN.
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PINNEL, TOM
Address: 2651 CHATHAM CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: VPD (X) Change () Addition
Name: BAGLEY, MIKE
Address: 2591 CHATHAM CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: STD (X) Change () Addition
Name: CLOOS, MARCEL
Address: 2648 CHATHAM CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: D (X) Change () Addition
Name: RILKE, GLENN
Address: 2587 CHATHAM CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: D (X) Change () Addition
Name: GOMES, ADRIANA
Address: 2613 CHATHAM CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

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: DAWN LENOVER

CAM

01/07/2009

Electronic Signature of Signing Officer or Director

Date