2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41980

FILED Mar 30, 2007 Secretary of State

Entity Name: CHELSEA RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2180 W. STATE RD. 434 **SUITE 5000** LONGWOOD, FL 327795044 **New Mailing Address: Current Mailing Address:** 2180 W. STATE RD. 434 SUITE 5000 LONGWOOD, FL 327795044 FEI Number: 59-3050965 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HART, JAMES W JR 2180 W. SR 434 STE 5000 LONGWOOD, FL 327795044 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD (X) Change () Addition () Delete SATTERLEE, CAROLYN JAGENOW, LAURA Name: Name: 2336 RIDGESIDE RD. Address: 940 RIDGESIDE CT Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: SD (X) Change () Addition HENESY, SUE A Name: HENESY, SUE Name: Address: 9914 RIDGE SPRING CT. Address: 914 RIDGE SPRING CT City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 Title: SD (X) Delete Title: () Change () Addition HICKS, JOANNE Name: Name: 925 RIDGE SPRING CT. Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: Title: PD () Delete Title: VPD (X) Change () Addition Name: RIDINGER, CRAIG Name: RIDINGER, CRAIG 2404 RIDGESIDE ROAD 2404 RIDGESIDE ROAD Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: (X) Change () Addition GORZKA, JIM GORZKA, JIM Name: Name: 917 RIDGESIDE COURT 917 RIDGESIDE COURT Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: () Change (X) Addition ROSE, JEAN H Name: Name: Address: Address: 2433 RIDGESIDE RD APOPKA, FL 32712 City-St-Zip: 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: LAURA JAGENOW PD 03/30/2007