2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 20, 2006 08:00 AN **DOCUMENT # N50928 Secretary of State** CHILTINGTON COURT CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 15262 CEDARWOOD LANE 15262 CEDARWOOD LANE NAPLES, FL 33963 NAPLES, FL 33963 01102006 No Chg-NP CR2E037 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0357467 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SCOTT, DANIEL S. DO NOT WRITE 15230 CEDARWOOD LANE **UNIT C103** IN THIS SPACE NAPLES, FL 34110 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. Added to Fees Due by May 1, 2006 10. OFFICERS AND DIRECTORS TITLE P/D NAME SCOTT, DANIEL S. STREET ADDRESS 15230 CEDARWOOD LANE UNIT C103 CITY-ST-ZiP NAPLES, FL 34110 000000521075 05/02/06-80123-003 61.25 VDD TITLE NAME CARLSON, JAMES STREET ADDRESS 15260 CEDARWOOD LANE UNIT A201 CITY-ST-ZIP NAPLES, FL 34110 TITLE NAME PERRY, RAYMOND STREET ADDRESS 15260 CEDARWOOD LANE UNIT A101 DO NOT WRITE CITY-ST-ZIP NAPLES, FL 34110 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an enderess, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

Daniel S. Scott

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/06

239-592-7004

Daytime Phone #