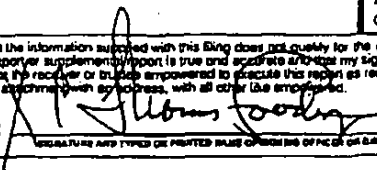


FILED
Jul 09, 2007 8:00 am
Secretary of State

05-04-2007 90071 010 ****61.25

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT.

DOCUMENT # N94000001709			
1. Entity Name THE CHEVAL SOUTH NEIGHBORHOOD ASSOCIATION, INC.			
Principal Place of Business 250 VENICE GOLF CLUB DR. VENICE, FL 34292 US		Mailing Address 250 VENICE GOLF CLUB DR. VENICE, FL 34292 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0494076		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THOMAS, BARBARA JEAN 250 VENICE GOLF CLUB DR. VENICE, FL 34292		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fee	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DP GOODING, THOMAS 250 VENICE GOLF CLUB DR. VENICE, FL 34292 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VPD JOSLYN, WALTER 250 VENICE GOLF CLUB DR. VENICE, FL 34292 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD STRAUSSER, CATHERINE 250 VENICE GOLF CLUB DR. VENICE, FL 34292 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DT REARDON, JERRY 250 VENICE GOLF CLUB DR. VENICE, FL 34292 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☒ Addition D. CRAVER, FRANK, D. 250 VENICE GOLF CLUB DR. VENICE FL 34292
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
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 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 its recorder or its duly 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 to this report, with all other (see instructions).			
SIGNATURE: 		4/23/07 944-496-848	
PRINTED NAME AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR		DATE	