

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001161

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** LES CHENES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

11649 CHARIOT LANE  
JACKSONVILLE, FL 32223

**New Principal Place of Business:**

11643 CHARIOT LANE  
JACKSONVILLE, FL 32223

**Current Mailing Address:**

11649 CHARIOT LANE  
JACKSONVILLE, FL 32223

**New Mailing Address:**

11643 CHARIOT LANE  
JACKSONVILLE, FL 32223

**FEI Number:** 59-3306156      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

WOOTEN, JOSEPH I  
11649 CHARIOT LANE  
JACKSONVILLE, FL 32223      US

**Name and Address of New Registered Agent:**

TUGGLE, JEANMARIE  
11643 CHARIOT LANE  
JACKSONVILLE, FL 32223      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: JEANMARIE TUGGLE

05/01/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: WOOTEN, JOSEPH I  
Address: 11649 CHARIOT LN  
City-St-Zip: JACKSONVILLE, FL 32223

Title: SD      ( ) Delete  
Name: TUGGLE, JEANMARIE  
Address: 11643 CHARIOT LANE  
City-St-Zip: JACKSONVILLE, FL 32223

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JEANMARIE TUGGLE

SD

05/01/2009

Electronic Signature of Signing Officer or Director

Date