

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001789

FILED
Apr 05, 2008
Secretary of State

Entity Name: CHATHAM WOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5549 CHATHAM WOODS COURT
ORLANDO, FL 32808 US

New Principal Place of Business:

Current Mailing Address:

5549 CHATHAM WOODS COURT
ORLANDO, FL 32808 US

New Mailing Address:

FEI Number: 59-3430277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRY, MARCUS
5549 CHATHAM WOODS COURT
ORLANDO, FL 32808 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: P () Delete
Name: PERRY, MARCUS
Address: 5549 CHATHAM WOODS COURT
City-St-Zip: ORLANDO, FL 32808 US

Title: VP () Delete
Name: LEWIS, ALVIN
Address: 5500 CHATHAM WOODS COURT
City-St-Zip: ORLANDO, FL 32808

Title: S () Delete
Name: BROWN, LUCRESHA
Address: 5555 CHATHAM WOODS COURT
City-St-Zip: ORLANDO, FL 32808 US

Title: AS () Delete
Name: HENDERSON, DARRYL
Address: 5501 CHATHAM WOODS COURT
City-St-Zip: ORLANDO, FL 32808 US

Title: T () Delete
Name: BODNEY, LEZETTA
Address: 5512 CHATHAM WOODS COURT
City-St-Zip: ORLANDO, FL 32808 US

Title: AT () Delete
Name: MENDEZ, NELLY
Address: 5513 CHATHAM WOODS COURT
City-St-Zip: ORLANDO, FL 32808 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LEZETTA BODNEY

T

04/05/2008

Electronic Signature of Signing Officer or Director

Date