

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90003 022 ****61.25

DOCUMENT # N96000005414

1. Corporation Name

CHEVALIER SUBDIVISION PHASE 3 HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

510 EAST ZARAGOZA STREET
PENSACOLA FL 32501

Mailing Address

510 EAST ZARAGOZA STREET
PENSACOLA FL 32501



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

10/21/1996

4. FEI Number

59-3419896

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

SAUER, JEFFREY T
510 EAST ZARAGOZA STREET
PENSACOLA FL 32501

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME COROTHERS, ROBERTA
STREET ADDRESS 1515 EAST DESOTO ST.
CITY-ST-ZIP PENSACOLA FL 32501

TITLE D ☒ DELETE
NAME MORRIS, GAIL
STREET ADDRESS 5508-B NORTH W STREET
CITY-ST-ZIP PENSACOLA FL 32505

TITLE D ☒ DELETE
NAME HUDNALL, DUNCAN R
STREET ADDRESS 5508-V NORTH "W" STREET
CITY-ST-ZIP PENSACOLA FL 32505

TITLE D ☐ DELETE
NAME Park Learned
STREET ADDRESS 4085 COBIA ST.
CITY-ST-ZIP Pensacola, FL 32507

TITLE D ☐ DELETE
NAME Shelley Johnson
STREET ADDRESS 6035 ELECTRA LANE
CITY-ST-ZIP Pensacola, FL 32507

TITLE D ☐ DELETE
NAME John Petit
STREET ADDRESS 5741 GRUMANN
CITY-ST-ZIP Pensacola, FL 32507

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME Chris Vitt
1.3 STREET ADDRESS Fredrick Drive
1.4 CITY-ST-ZIP Pensacola, FL 32507

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME Marcel Davis
2.3 STREET ADDRESS 4093 Cobia St.
2.4 CITY-ST-ZIP Pensacola, FL 32507

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME Park Learned
3.3 STREET ADDRESS 4085 Cobia St.
3.4 CITY-ST-ZIP Pensacola, FL 32507

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)