# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 27, 2007**
**Secretary of State**

DOCUMENT# N97000004244

**Entity Name:** CHANDLER BEND CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

238 CHANDLER STREET
CAPE CANAVERAL, FL 32920

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 254090
PATRICK AFB, FL 329254090

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

LOTSPEICH, RALPH S JR.
7008 SEVILLA CT #406
CAPE CANAVERAL, FL 32920 US

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

LOTSPEICH, RALPH S JR.
3611 S. BANANA RIVER BLVD
COCOA BEACH, FL 32931 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: _____ 04/27/2007
Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete
Name: LOTSPEICH, RALPH S JR
Address: 7008 SEVILLA COURT #406
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: SD ( ) Delete
Name: BIERY, SUSZI
Address: 69 N. ORLANDO AVENUE
City-St-Zip: COCOA BEACH, FL 32931

Title: VD ( ) Delete
Name: SARNKASTSAMIS, TOM
Address: 238 CHANDLER ST #104
City-St-Zip: CAPE CANAVERAL, FL 32920

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

Title: PTD (X) Change ( ) Addition
Name: LOTSPEICH, RALPH S JR
Address: 3611 S BANANA RIVER BLVD
City-St-Zip: COCOA BEACH, FL 32931

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: RALPH S LOTSPEICH PTD 04/27/2007
Electronic Signature of Signing Officer or Director — Date