2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007098

Entity Name: HATTON CHASE MASTER ASSOCIATION, INC.

FILED May 02, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

11512 LAKE MEAD AVE STE 405 12187 BEACH BLVD. JACKSONVILLE, FL 32256

SUITE 4

JACKSONVILLE, FL 32246

Current Mailing Address: New Mailing Address:

7643 GATE PKWY STE 104 PMB 188 12620-3 BEACH BLVD. #301 JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32246

FEI Number: 59-3491737 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: Name and Address of New Registered Agent:

BALASKIEWIZC, KIM JARNUTOWSKI, SHERRIE 11512 LAKE MEAD AVE STE 405 12620-3 BEACH BLVD. #301 US JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32246

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: SHERRIE JARNUTOWSKI 05/02/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

ABDALLAH, KABBANI ABDALLAH, KABBANI Name: Name: Address: 12572 BRIARMEAD LANE Address: 12620-3 BEACH BLVD. #301 City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: JACKSONVILLE, FL 32258

Title: () Delete Title: () Change () Addition

PORTER, CAROLYN Name: Name: Address: 14495 CHESHAM COURT Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

VEGA, PETERSON Name: Name: 14471 CHESHAM COURT Address: Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

VORHEES, DONALD Name: Name: 14477 WOODFIELD CIRCLE N. Address: Address: City-St-Zip: JACKSONVILLE, FL 32258 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: SHERRIE JARNUTOWSKI RΑ 05/02/2009