


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # N98000004399 1. Entity Name STEEPLECHASE ESTATES HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business 3525 BUNKER RD LAKELAND, FL 33811	Mailing Address 3525 BUNKER RD LAKELAND, FL 33811
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DO NOT WRITE IN THIS SPACE



04282007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3539882	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent JACKSON, ROBERT M 3525 BUNKER RD LAKELAND, FL 33811

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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROBINSON, JAMES D 3600 BUNKER DR LAKELAND, FL 33811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JACKSON, ROBERT M 3525 BUNKER ROAD LAKELAND, FL 33811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARVIN, GLEN 10151 DEERWOOD PK BLVD, BLDG 100, STE 330 JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROBINSON, JAMES D 3600 BUNKER RD LAKELAND, FL 33811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JACKSON, SUSAN L 3525 BUNKER ROAD LAKELAND, FL 33811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELMA, MICHAEL 3625 BUNKER DR LAKELAND, FL 33811

<p>U00000747863 05/17/07-80043-008 61.25</p> <p>DO NOT WRITE IN THIS SPACE</p>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.
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SIGNATURE: <u>James D Robinson</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>JAMES D ROBINSON</u> <u>28 APR 2007</u> <small>Date</small>
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