## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** May 02, 2005 8:00 am Secretary of State

DOCUMENT # N9800005047  1. Entity Name CHANDLER OAKS HOME OWNERS ASSOCIATION, INC.					2005 90568 012 ****70		
1738 KINGSLEY AVE. 17: #202 #2 ORANGE PARK, FL 32073 OR		Mailing Address 1732 KNGSLEY AVE. #202 ORANGE PARK, FL 320	1732 KNGSLEY AVE.		1911 1911 1911 1914 1914 1914 1914 1914	<b>                                   </b>	
1 ************************************		3. Mailing Address					
Suite, Apt. # Community M. Suite, Apt. # 22065  City despite Blanding Brud. 22065  Zip Orange Park. FL 32065  Zip Orange Park.		Suite, Apt. #, etc.  Suite, Apt. #, etc.  Pirotessional Community Mgt. Inc.  Pirotessional BNd. #18  Pirotessional BNd. #18  2065  786 Blanding Park. F. 32065  Country		01212005 Chg-NP	CR2E037 (10/03)		
Cirotos Blanding FL		Protessioning Br. 32063		4. FEI Number 59-3329059	<del></del>	plied For Applicable	
Zip Ora	Country	ZijOrarig	Country	5. Certificate of Status Des	sired \$8.75 Addi Fee Required		
	6. Name and Address of Curren	t Registered Agent —		7. Name and Address of	New Registered Agent —		
PERRY, ALAN 1732 KINGSLEY AVE: #202			Name Street Address	Street Address (P.O. Box Number is No. '			
ORANGE PARK, EL 32073				Alan Perry 786 Blanding Blvd. #118 786 Blanding Park, FL 32065			
			City	Alan Perry 786 Blanding Blvd. #11 786 Bloom Blvd. #11 786 Bloom Blvd. #11 786 Bloom Blvd. #11 786 Bloom Blvd. #11			
8. The above the obligation	e named entity submits this statement f tions of registered agent.	for the purpose of changing its	registered office or regist	tered agent, or both, in the State	e of Florida. I am familiar with, a	and accept	
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature refluered when reinstating)  DATE							
1	•	I and hos is appricable (1901)	c: Hegistered Agent signature requi	red when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2005		mpaign Financing	\$5.00 May Be Added to Fees	Make check payable to Florida Department of Sta		
10.	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND D	9. Election Car Trust Fund C	npaign Financing	\$5.00 May Be Added to Fees	Make check payable to	ate	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Car Trust Fund C	npaign Financing Contribution.	\$5.00 May Be Added to Fees	Make check payable to Florida Department of Sta	ate	
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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 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.

SIGNATURE: