

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05457

**FILED**  
**Feb 14, 2013**  
**Secretary of State**  
**CC6553305549**

**Entity Name:** CHICKASAW OAKS PHASE THREE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779

**Current Mailing Address:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779 US

**FEI Number: 59-2588789**

**Certificate of Status Desired: No**

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

HART, JAMES W JR.  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 SUITE 5000  
LONGWOOD, FL 32779 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: JAMES W HART JR**

**02/14/2013**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           FULTON, BILL  
Address        2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title           VP  
Name           GARRIDO, GEORGE  
Address        2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title           TREASURER  
Name           SAMPSON, JEANIE  
Address        2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title           SECRETARY  
Name           BURNER, DEBI  
Address        2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title           DIRECTOR  
Name           PEREZ, TERESA  
Address        2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title           DIRECTOR  
Name           SAN FILIPPO, MICHAEL  
Address        2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

*I hereby 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 all other like empowered.*

**SIGNATURE: BILL FULTON**

**PRESIDENT**

**02/14/2013**

Electronic Signature of Signing Officer/Director Detail

Date