2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#729340

FILED Feb 22, 2007 Secretary of State

Entity Name: CHALFONTE CONDOMINIUM APARTMENT ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 550 SOUTH OCEAN BLVD. BOCA RATON, FL 33432 **Current Mailing Address: New Mailing Address:** 550 SOUTH OCEAN BLVD. BOCA RATON, FL 33432 FEI Number: 59-1555340 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JORDAN, JANET 550 SOUTH OCEAN BLVD BOCA RATON, FL 33432 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GOLDMAN, KURT Name: Name: 550 S OCEAN BLVD Address: Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: Title: () Delete Title: () Change () Addition BELL, FRED Name: Name: Address: 550 S OCEAN BLVD Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: Title: () Delete Title: (X) Change () Addition GOLDSTEIN, SANFORD GOLDSTEIN, SANFORD Name: Name: 550 S OCEAN BLVD 550 S OCEAN BLVD Address: Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432 () Delete Title: Title: (X) Change () Addition Name: ABRAMOWITZ, ARTHUR Name: LAINE, STEVE Address: 550 S OCEAN BLVD Address: 550 S OCEAN BLVD City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432 Title: () Delete Title: (X) Change () Addition SCHMALE, FRED JARACKAS, NANCY Name: Name: 500 S OCEAN BLVD 500 S OCEAN BLVD Address: Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432 Title: () Delete Title: () Change () Addition HOPLAMAZIAN, ARIS Name: Name: Address: 550S OCEAN BLVD Address: BOCA RATON, FL 33432 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SANFORD GOLDSTEIN T 02/22/2007