

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 742431 (0)

1. Corporation Name

CHATHAM K CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

CHATHAM K211  
W PALM BCH FL 33417

Mailing Address

CHATHAM K211  
W PALM BCH FL 33417

3. Date Incorporated or Qualified

04/14/1978

3a. Date of Last Report

04/13/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUCHIN, HAL  
CHATHAM K211  
WEST PALM BEACH FL 33417

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and state if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME GLEIZER, DORA  
STREET ADDRESS CHATHAM, K-210  
CITY-ST-ZIP W. PALM BEACH FL ☒ DELETE

1.1 TITLE  
1.2 NAME D LENA GORDON  
1.3 STREET ADDRESS CHATHAM-K-213  
1.4 CITY-ST-ZIP W.P.B. FL. 33417 ☐ Change ☐ Addition

TITLE D  
NAME LEVY, SYLVIA  
STREET ADDRESS CHATHAM, K-217  
CITY-ST-ZIP W. PALM BEACH FL ☒ DELETE

2.1 TITLE  
2.2 NAME BARBARA CALLUZE - D  
2.3 STREET ADDRESS CHATHAM-K-216  
2.4 CITY-ST-ZIP W.P.B. FL. 33417 ☐ Change ☐ Addition

TITLE D  
NAME FRIEDLAND, SADIE  
STREET ADDRESS CHATHAM, K-225  
CITY-ST-ZIP W. PALM BEACH FL ☒ DELETE

3.1 TITLE  
3.2 NAME V.P. DAVID FRIEDLAND  
3.3 STREET ADDRESS CHATHAM-K-211  
3.4 CITY-ST-ZIP W.P.B. FL. 33417 ☒ Change ☐ Addition

TITLE TD  
NAME KESSELMAN, HARRY  
STREET ADDRESS CHATHAM K 224 CENN  
CITY-ST-ZIP W PALM BEACH FL ☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD  
NAME KUSHER, FRIEDA  
STREET ADDRESS CHATHAM-K 229  
CITY-ST-ZIP WEST PALM BCH FL ☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP  
NAME BROOKS, SEYMOUR  
STREET ADDRESS CHATHAM-L-221  
CITY-ST-ZIP WEST PALM BEACH FL ☒ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Hal Duchin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/96

(407) 683-4653

CR2E037 (12/95)