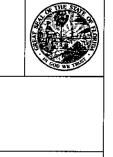
2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 742431

1. Entity Name

CHATHAM K CONDOMINIUM ASSOCIATION, INC.



FILED Jan 08, 2003 8:00 am Secretary of State

01-08-2003 90070 034 ****61.25

Principal Place of Business 227 CHATHAM K W PALM BCH FL 33417 US		Mailing Address 227 CHATHAM K W PALM BCH FL 33417 US) (88 112 188 11 8 11)(8 1/8)(8/8)(8/8)	[[0]] [] [0]] []	2(0() 0(2)) 1001	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State	: 3.	<i>.</i>	4. FEI Number 59-1820309		}+	Applied For Not Applicable	
Zip	Country S.	Zip	Country	,	5. Certificate of St	atus Desired	\$8.75 A		7
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
ALLAIRE 227 CHA	Name Street A	Name Street Address (P.O. Box Number is Not Acceptable)							
WEST	ALM BEACH FL 33417		JED V BLWE	ENT O	F STATE				
~			City		<u> </u>		FL Zip Co	ode	7
the obliga SIGNATURE	e named entity submits this statement for attorns, of registered agent. Signature, typed or printed name of registered agent a	nd title if applicable. (NOT	E. Regislered Agent signatu				DATE		
	FILE NOW: FEE IS \$61.25		mpaign Financing Contribution.		\$5.00 May Be Added to Fees		Check Payable epartment of		
10.	OFFICERS AND DIR	ECTORS	11.		DDITIONS/CHANGE	S TO OFFICERS AT	ND DIRECTORS I	IN 10	١.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, ROBERT 220 CHATHAM K WEST PALM BEACH FL 33417	. 🗖 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Harr 220 Wes	ris Arlene CHAThar Palm Bo	e n K ach FL.3	□ Change 34/7	☐ Addition	5037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ZIPMAN, ERNEST 232 CHATHAM K WEST-PALM BEACH: FL: 33417	☐ Delete	TITLE NAME STREET ADDRESS . CITY-ST-ZIP			_	☐ Change	Addition	Icas
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALLAIRE, MILDRED L 227 CHATHAM K WEST PALM BEACH FL 33417	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE Name Street address City-St-Zip	D BUSHAIKIN, SIDELE 209 CHATHAM K WEST PALM BEACH FL 33417	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZIPMAN, BARBARA 232 CHATHAM K WEST PALM BEACH FL 33417	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			-	☐ Change	Addition	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALLAIRE, RICHARD F 33 TCHATHAM K WEST PALM BEACH FL 33417	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	

12. I hereby certify that the information supplied with this filling 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: