FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

742434

(4)

1. Corporation	n Name	` '			
CHATH	IAM N CONDOMINIUM ASSO	OCIATION, INC.			
Principal Place of Business		Malling Address			n Labelts indolf Black sinch alden allift Black andte anate anate aldet afdit skat
273 CHATHAM N		CHATHAM N 283			3. Date Incorporated or Qualified
WEST PALM BEACH FL 33417		WEST PALM BEACH FL 33417			04/14/1978
US		U\$			4. FEI Number Applied For
					59-1622527 Not Applicable
2. Principal Place of Business		2a. Mailing Address			5. Certificate of Status Desired S8.75 Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Fee Required
22		27			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State		City & State			7. Is this nonprofit corporation a homeowners association?
Zip Country		Zip Country		· · · · · · · · · · · · · · · · · · ·	Yes X No
24	25	h	10	,	6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒️ No
	9. Name and Address of Current				10. Name and Address of New Registered Agent
			81	Name	GREG J. GuiDO
TURNER	• =	62 Street Addr		Street	t Address (P.O. Box Number is Not Acceptable)
1	M N 283			27	78 CHA+HAM N
	BEACH, FL		83	'	
33417			84	City	PALM BEACH FL 85 Zip Code 33417
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation					d corporation submits this statement for the purpose of changing its registered
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 famility with, and accept the obligations of Section 617.0503, Florida Statutes.					
SIGNATURE	In vegora f.	Luis			426/98
12.	Signature, typed or printed name of registered agen		Registered Ag	ent signature	re required when reinstating) / DATE / ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	OFFICERS AND	DELETE	1.1 TITLE		Change Addition
NAME	FRIEDMAN, SADIE		1.2 NAME	i	
STREET ADDRESS	273 CHATHAM N		1.3 STREE	T ADDRESS	
CITY-ST-ZIP	W PALM BEACH, FL 00000		1.4 CITY-	ST-2IP	
TITLE	VPD	☐ DELETE	2.1 TITLE		Change □ Addition
NAME	MISSIK, BILL		2.2 NAME		280 CHA+HAM N
STREET ADDRESS	580 CHATHAM N			T ADDRESS	288 CHATHAM N
C/TY-ST-ZIP TITLE	W PALM BEACH, FL 00000 TD	X DELETE	2.4 CITY- 3.1 TITLE	ST-ZIP	TD ∠ Addition
NAME	TURNER, RUTH	Q	3.2 NAME		TO CHATHAM N
STREET ADDRESS	CHATHAM N 283 CEN VIL			T ADDRESS	278 CHATHAM N
CITY-ST-ZIP	W PALM BEACH, FL 00000		3.4. CITY-	ST-ZIP	W. PALM BEACH - FL 33417
TITLE	VP	DELETE	4.1 TITLE		Change Addition
NAME	PERLMUTTER, AL		4. 2 NAME		
STREET ADDRESS	CHATHAM N-269 CEN VILL		1.00	T ADDRESS	
CITY-ST-ZIP	W PALM BEACH, FL 00000	DELETE	4.4 CITY-	ST-ZIP	☐ Change ☐ Addition
TITLE NAME	NANAGANO, VINCENT	C DELETE	5.1 TITLE 5.2 NAME		Ent outside Ent wherithis
STREET ADDRESS	CHATHAM N 288 CEN VILL			T ADDRESS	
CITY-ST-ZIP	W PALM BEACH, FL 00000		5.4 CITY-		
TITLE	<u> </u>	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREE	T ADDRESS	
CITY-ST-ZIP	andily that the information assent and safe	h this filing does not availe to	6.4 CITY-	ST-ZIP	tod in Scotion 110 07/2V// Elevido Statutos I further contity that the Information
indicated	ering that the information supplied with on this annual report or supplemental	annual report is true and accur	rate and th	nat my sig	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information ignature shall have the same legal effect as if made under oath; that I am an as required by Chapter 617, Florida Statutes; and that my name appears in
officer or Block 12	director of the corporation or the recei or Block 13 if changed, or on an attac	ver or trustee empowered to ex hment with an address.	ecute this	report as	is required by Chapter 617, Florida Statutes; and that my name appears in
1	1	-1 2 1		ic f	FRIEDMAN 1/1/00

FILED

Mar 10 1998 8:00am

Secretary of State