

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

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-14-2003 90040 045 *****70.00

DOCUMENT # 742434

1. Entity Name
CHATHAM N CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**278 CHATHAM N
WEST PALM BEACH FL 33417
US**

Mailing Address
**278 CHATHAM N
WEST PALM BEACH FL 33417
US**

Change to

2. Principal Place of Business

3. Mailing Address

265 Chatham N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

West Palm Bch FL

Zip

Country

33417

Country

Palm Beach

6. Name and Address of Current Registered Agent

**GUIDO, GREGORY J
278 CHATHAM N
WEST PALM BEACH FL 33417**

7. Name and Address of New Registered Agent

Name *Helen M. Herndon*
Street Address (P.O. Box Number is Not Acceptable)
265 Chatham N
West Palm Bch.
City *West Palm Bch* FL Zip Code *33417*

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Gregory J. Guido

Helen M. Herndon

1/31/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **SD**
NAME **FRIEDMAN, SADIE** ☐ Delete
STREET ADDRESS **273 CHATHAM N**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **VPD**
NAME **MISSIK, BILL** ☐ Delete
STREET ADDRESS **280 CHATHAM N**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **TD**
NAME **GUIDO, GREG J** ☐ Delete
STREET ADDRESS **278 CHATHAM N**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE **VP**
NAME **LOVINGU, SODIL** ☒ Delete
STREET ADDRESS **268 CHATHAM N**
CITY-ST-ZIP **WEST PALM BEACH FL 33417**

TITLE **P**
NAME **NANAGANO, VINCENT** ☒ Delete
STREET ADDRESS **288 CHATHAM N**
CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PRESIDENT** ☒ Change ☐ Addition
NAME **JOSEPHINE NANGANO**
STREET ADDRESS **288 CHATHAM N**
CITY-ST-ZIP **WEST PALM Bch, FL 33417**

TITLE **D** ☒ Change ☐ Addition
NAME **GREG J GUIDO**
STREET ADDRESS **278 CHATHAM N**
CITY-ST-ZIP **West Palm Bch, FL 33417**

TITLE **D** ☐ Change ☐ Addition
NAME **SECRETARY - D**
STREET ADDRESS **E'DNA WIDELL**
CITY-ST-ZIP **276 CHATHAM N**
West Palm Bch, FL 33417

TITLE **D** ☒ Change ☐ Addition
NAME **TREASURER - D**
STREET ADDRESS **Helen M. Herndon**
CITY-ST-ZIP **265 CHATHAM N**
West Palm Bch, FL 33417

TITLE **DELEGATE** ☐ Change ☒ Addition
NAME **JOE RICO**
STREET ADDRESS **285 CHATHAM N**
CITY-ST-ZIP **West Palm Bch, FL**

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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

Josephine Nangano

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)