

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742438

FILED  
Mar 12, 2010  
Secretary of State

Entity Name: CHATHAM S CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

382 CHATHAM S  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

377 CHATHAM S  
WEST PALM BEACH, FL 33417 US

**Current Mailing Address:**

SEACREST SERVICES INC  
2400 CENTREPARK W DR #175  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

CHATHAM S C/O SEACREST SERVICES INC  
2400 CENTREPARK W DR #175  
WEST PALM BEACH, FL 33409 US

FEI Number: 59-1819979

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BAUCH, LILLIAN  
372 CHATHAM S  
WEST PALM BEACH, FL 33417 US

**Name and Address of New Registered Agent:**

LEVEY, IRMA  
381 CHATHAM S  
WEST PALM BEACH, FL 33417 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: IRMA LEVEY

03/12/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LAMONACA, GLENDA  
Address: 370 CHATHAM S  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP  
Name: LEVEY, IRMA  
Address: 381 CHATHAM S  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T  
Name: BRUNO, PATRICIA J  
Address: 377 CHATHAM S  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S  
Name: BAUCH, LILLIAN  
Address: 372 CHATHAM S  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D  
Name: BASUK, FLORENCE  
Address: 382 CHATHAM S  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D  
Name: KALOGEROPOULOS, CAROLE  
Address: 375 CHATHAM S  
City-St-Zip: WEST PALM BEACH, FL 33417 US

I hereby 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 all other like empowered.

SIGNATURE: GALE CORONA

MS

03/12/2010

Electronic Signature of Signing Officer or Director

Date