

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742755

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: CHATHAM R CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

353 CHATHAM R  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

**Current Mailing Address:**

353 CHATHAM R  
WEST PALM BEACH, FL 33417 US

**New Mailing Address:**

FEI Number: 59-1820851      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

EDELSTEIN, ARNOLD  
353 CHATHAM R  
WEST PALM BEACH, FL 33417 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: EDELSTEIN, ARNOLD  
Address: 353 CHATHAM R  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: V ( ) Delete  
Name: HELIE, NICOLE  
Address: 355 CHATHAM R  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: T ( ) Delete  
Name: PLATT, IRENE  
Address: 368 CHATHAM R  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: S ( ) Delete  
Name: HELIE, NICOLE  
Address: 355 CHATHAM R  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D ( ) Delete  
Name: AMYOT, ANDRE  
Address: 367 CHATHAM R  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D ( ) Delete  
Name: CLEMENT, RAYMOND  
Address: 366 CHATHAM R  
City-St-Zip: WEST PALM BEACH, FL 33417

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: IRENE PLATT

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

T

02/12/2009

\_\_\_\_\_  
Date