

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 24 1997 8:00am
Secretary of State

DOCUMENT # 768198 (4)

1. Corporation Name

CHASEWOOD OF JUPITER CONDOMINIUM ASSOCIATION, IN C.



Principal Place of Business

Mailing Address

6381 CHASEWOOD DR.
JUPITER FL 33458
US

6381 CHASEWOOD DR.
JUPITER FL 33458-5548
US

3. Date Incorporated or Qualified
04/29/1983

3a. Date of Last Report
04/25/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

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4. FEI Number
59-2382304

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MALPIEDI, CHRISTOPHER
6381 CHASEWOOD DR
JUPITER FL 33458

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
VP-D	PERRONE, DON	6499-D CHASEWOOD DR	JUPITER FL	<input type="checkbox"/>
S	DAVIN, JUNE	6468-H CHASEWOOD DR	JUPITER FL	<input checked="" type="checkbox"/>
P	NERI, DAN	6272-H CHASEWOOD DR	JUPITER FL	<input checked="" type="checkbox"/>
D	KUHN, PETE	6313-D CHASEWOOD DR	JUPITER FL	<input type="checkbox"/>
D-T	SWEARIGEN, DEAN	6370-A CHASEWOOD DR	JUPITER FL	<input type="checkbox"/>
D	CUTT, KEN	6392-H CHASEWOOD DR	JUPITER FL	<input checked="" type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
P	Wilma Baron	6380-G Chasewood Dr.	Jupiter, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Asst. Treas.	Geoffrey Shipley	6327-G Chasewood Dr.	Jupiter, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S	Kim Tripp	6447-F Chasewood Dr.	Jupiter, FL 33458	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	Whitey Manahan	6286-E Chasewood Dr.	Jupiter, FL 33458	<input type="checkbox"/>	<input checked="" type="checkbox"/>
P	Peg Sinnott	6328-D Chasewood Dr	Jupiter, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Erwin Fritsch	6327-A Chasewood Dr.	Jupiter, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Wilma A. Baron REQUIRED

4/18/97

744-1617

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0043509

CR2E037 (9/96)