2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

🕹 - 🗁 🍎

FILED Apr 12, 2004 8:00 am Secretary of State

04-12-2004 90235 048 ****61.25 DOCUMENT # N01000006112 1. Entity Name CHATHAM AT AQUA CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 54029953 1632 PENNSYLVANIA AVE. 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02112004 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 65-1157868 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEWIS, HAROLD L ESQ. ONE BISCAYNE TOWER, STE, 2400 Street Address (P.O. Box Number is Not Acceptable) 2 S. BISCAYNE BLVD. MIAMI, FL 33131 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE DPST Delete TITLE Addition ☐ Change ROBINS, CRAIG NAME NAME STREET ADDRESS 1632 PENNSYLVANIA AVE. STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 CITY-ST-ZIP DV TITLE ☐ Delete TITLE ☐ Change ☐ Addition GRETENSTEIN, STEVE NAME NAME 1632 PENNSYLVANIA AVE. STREET ADDRESS STREET ADDRESS CITY-ST-7iP MIAMI BEACH, FL 33139 CITY-ST-ZIP D Delete TITLE TITLE ☐ Change ☐ Addition NAME BENSON, CONNIE NAME STREET ADDRESS 1632 PENNSYLVANIA AVE. STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 CITY-S1-ZIP TITLE ☐ Delete TITLE ☐ Change Addition Baron, Ross (Director) NAME NAME 1632 Pennsylvania Avenue STREET ADDRESS STREET ADDRESS Miami Beach, FL 33139 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information antal 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 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 12. I hereby certify that the informaindicated on this report or sup of the corporation or the recei trustee empowa changed, or on an attachme CONDOMINIUM ASSOCIATION, INC.

SIGNATURE:

VICE PRESIDENT OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/04

(305) 531-8700

Daytime Phone #