FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandre B. Morthan Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

CITY-ST-ZIP

(5)

CHATHÀM TOWNE AT JACARANDA CONDOMINIUM ASSOCIATI

Principal Place of Business Mailing Address 2901 SIMMS ST. 2901 SIMMS ST. 3. Date incorporated or Qualified 3050 N. 28TH TERRACE 3050 N. 28TH TERRACE 04/01/1986 HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 4. FEI Number Applied For Not Applicable 59-2778388 2. Principal Place of Business 2a. Malling Address \$8.75 Additional 5. Certificate of Status Desired 21 Fee Required Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing \Box Added to Fees 22 Trust Fund Contribution City & State 7. Is this nonprofit corporation a homeowners association? Yes X No 23 Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name D.C.I. 62 2901 SIMM\$ ST. C/O ANDREW MEYROWITZ HOLYLWOOD FL 33020-1302 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 familian with accept the appointment as registered agent. I am familian with accept the appointment as registered agent. **SIGNATURE** of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition □ DELETE 1.1 TITLE TITLE FITZPATRICK, BETTY 1.2 NAME NAME 8835 NW 1ST COURT 1.3 STREET ADDRESS STREET ADDRESS **PL**ANTATION FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME Mann, Renee NAME 2.3 STREET ADDRESS 9826 NW 1ST COURT STREET ADDRESS PLANTATION FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP ■ Addition Change DELETÉ 3.1 TITLE TITLE 3.2 NAME CARSON, GEORGE NAME 9815 NW 1ST COURT 3.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 200002660892 4 2 NAME DOMINICK, FEZELLO NAME **~10**/09/98---01086---**02**7 4.3 STREET ADDRESS 144 NW 98TH 98TH TERRACE STREET ADDRESS ***61.25 **PL**ANTATION FL 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME **EDELMAN. MICHELE** NAME **53 STREET ADDRESS** 9801 NW 1ST COURT STREET ADDRESS 5.4 CITY-ST-ZIP **PLANTATION FL** CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 108 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the control 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 it charged, or on an attachment with an address. 3-2-98 aculto2080

FILED

Oct 08 1998 8:00am

Secretary of State