FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # N05887

(7)

THE CHARTER CLUB OF PALM BEACH CONDOMINIUM ASSOC

Principal Place of Business Mailing Address				A PARAMAN AND A PARAMAN AN	T 2002/201 ALL DRIVER ARKAL LALAL HORY ROOM ALL LICENT BUILD BLOW ARRY ALLES LAND		
200 FOXTA WEST PAL	AIL DR .M BEACH FL 33415	200 FOXTAIL DR West Palm Beach FL	33415				
				 Date Incorporated or Qualified 10/26/1984 	3a. Date of Last 04/05/		
·	Place of Business	2a, Mailing Address		4. FEI Number		Applied For	
21 Suite, Apt	t # ata	26		59-2469338		Not Applicable	
22		Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional Required	
City & Sta	ne	City & State		6. Election Campaign Financing	□ \$5.0	0 May Be	
Zip	Country	Zip	Country	Trust Fund Contribution	Adde	d to Fees	
24	25		30]	This corporation has liability for int Florida Statutes	tangible tax under s. Yes X } No	199.032,	
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Re			
			81 Name		, <u>.</u>		
GALLA	AGHER, JOHN		82 Street	HERBERT MILLER Address (P.O. Box Number is Not Acceptable)			
204 B2 FOXTAIL DRIVE			35	03 Ridge Tree Court	}		
WEST PALM BEACH FL 33415			83	se manage iroc courc			
			84 C <u>it</u> y		85 Zip	o Code	
11. Pursuant	to the provisions of Sections 617.05	02 and 617 1509 Florido Statutas	the chaire serveral -	eenacres,		o Code 3 4 6 3	
or registe	ered agent, or both, in the State of Fic	orida. Such change was authorized i	the above-hamed c by the corporation's	orporation submits this statement for the purpor board of directors. I hereby accept the appoin	ose of changing its re otment as registered	egistered office	
	HERBERT MILLE	ction 617.0503, Florida Statutes.				ago na ram	
SIGNATURE	Signature, typed or printed name of registered ago		erbert :	melle 4	-25-96		
12.		ND DIRECTORS	Registereo Agent signature :	required when reinstating; ADDITIONS/CHANGES TO OFFIC	DATE	DO IN 10	
TITLE	PD	DELETE	1.1 TITLE	PD	Change	Addition	
NAME	GALLAGHER, JOHN		1.2 NAME	HERBERT MILLER	M avenia	L realition	
STREET ADDRESS	204 B2 FOXTAIL DRIVE		1.3 STREET ADDRESS	3503 Ridge Tree Co			
CITY-S1-ZIP	WEST PALM BEACH FL		1.4 CHTY-ST-ZIP	Greenacres, Fl.334	ur L		
TITLE	VD VD	DELETE	2.1 TITLE	12:354	☐ Change	Addition	
NAME	ROWLEY, ROBERT A		2.2 NAME		Er o nongo		
STREET ADDRESS	201 H-1 FOXTAIL DR.		23 STREET ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH FL		2 4 CITY-ST-ZIP				
TITLE	VD	DELETE	3.1 TITLE	120	Change	Addition	
NAME	MILLER, HERBERT		3.2 NAME	\$4.00 MM		_ [
STREET ADDRESS	209 B1 FOXTAIL DR		3.3 STREET ADDRESS		* :		
CITY-ST-ZIP	WEST PALM BCH FL		3 4. CITY-ST-ZIP	<u> Cividence detativité d'abay à la l'Abré</u>			
TITLE	VD	DELETE	4.1 TITLE		Change	Addition	
NAME	JANOSKI, FRANK		4. 2 NAME				
STREET ADDRESS	204 B1 FOXTAIL DR		4.3 STREET ADDRESS			Í	
City-St-ZiP	W. PALM BEACH FL		4.4 CITY-ST-ZIP				
TITLE	TD MILLED ELEANOR	DELETE	5 1 TITLE		Change	Addition	
NAME OFFICE ADDRESS	MILLER, ELEANOR		52 NAME				
STREET ADDRESS	206 F2 FOXTAIL DR		5.3 STREET ADDRESS			ļ	
CITY-ST-ZIP TITLE	WEST PALM BOH FL	Decree	5.4 CITY-ST-ZIP			··· <u>·</u>	
NAME		DELETE	6.1 TITLE	S	Change	X Addition	
STREET ADDRESS			6.2 NAME	JULIAN BARTOLINI		İ	
CITY-ST-ZIP			6.3 STREET ADDRESS	205-F1 FOXTAIL DRI	VE		

14. I do hereby certify that the Information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(k), 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. HERBERT MILLER SIGNATURE:

4-25-96