FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N05887

THE CHARTER CLUB OF PALM BEACH CONDOMINIUM ASSOC IATION, INC.

Principal Place of Business

Mailing Address

200 FOXTAIL DR WEST PALM BEACH FL 33415 200 FOXTAIL DR WEST PALM BEACH FL 33415

FILED Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90037 014 ****61.25



3. Date Incorporated or Qualifed

2. Principal Place of Business - 2a. Mailing Address .			•		3. Date Incorporated or Qualifed
21		26			10/26/1984
	Suite, Apt. #, etc. Suite, Apt. #, etc.				4. FEI Number Applied For
22 27				59-2469338 Not Applicable	
City & Stat	α .	City & State	•		\$8.75 Additional
23 28					5. Certificate of Status Desired Fee Required
Zip	Country	Zip	Country		6. Election Campaign Financing 55.00 May Be
24		29 30	٦ ´		Trust Fund Contribution Added to Fees
24]	9. Name and Address of Currer		<u>'I</u>		10. Name and Address of New Registered Agent
81 Nam					
					Jeffrey Newsom e
MILLER, HERBERT			82	Street /	Address (P.O. Box Number is Not Acceptable)
3503 RIDGE TREE COURT.					207 Foxtail Drive #B-3
GREENACRES FL 33463					West Palm Beach, FL. 33415
1			84	City	85 Zip Code
1	To stopping to the			l	· FL
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 coept the obligations of, Section 617,0503, Florida Statutes.					
office or registered agent or poth, in the State of Florida. Such change was authorized by the corporation's board of directors. Florida accept the objection of 17,0503, Florida Statutes.					
9/0/199					
SIGNATURE	Signature for printer name of registered age	nt and title if applicable. (NOTE: Re	gistered Ager	nt signature n	required when reinstating) DATE
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	TD	☐ DELETE	1.1 TITLE	PD	Jeffrey Newsome ☐ Change ☒ Addition
NAME	BUCHAN, BARBARA		1.2 NAME		207 Foxtail Drive #B-3
STREET ADDRESS	209-C1 FOXTAIL DR	•	1.3 STREET	FADDRESS	1
CITY-ST-ZIP	W PALM BCH FL		1.4 CITY-S		West Palm Beach, FL. 33415
TITLE	VD .	☐ DELETE	21 TIILE		Change ∑ Addition
NAME	ROWLEY, ROBERT A		2.2 NAME	VD	Robert Rowley
	201 H-1 FOXTAIL DR. 23S			TADDRESS	201 H-1 Foxtail Drive
STREET ADDRESS					West Palm Beach, FL. 33415
CITY-ST-ZIP	WEST PALM BEACH FL	(X) DELETE	2.4 CITY-S 3.1 TITLE	51-ZIP	Change (X) Addition
TITLE	PD	123 DELETE	3.1 IIILE 3.2 NAME	SD	Andrea C. Jones
NAME	MILLER, HERBERT	I '			205 Foxtail Drive #C-2
STREET ADDRESS	COO THE GE THEE OT			West Palm Beach FL. 33415	
CITY-ST-ZIP	GREENACRES FL	W	3.4. CITY- S	T-ZIP	☐ Change ☐ Addition
TITLE	VD :	Ø DEFELE	4.1 TITLE	D	Barbara Buchan
NAME	JANOSKI, FRANK		4. 2 NAME	ן ע	209 C-1 Foxtail Drive
STREET ADDRESS	204 B1 FOXTAIL DR		4.3 STREE	T ADDRESS	
CITY-ST-ZIP	W. PALM BEACH FL		4.4 CITY-S	T-ZIP	
TITLE	SD	Ø DELETE	5.1 TITLE		Change Addition
NAME	SASMAN, CAROL		5.2 NAME		,
STREET ADDRESS	l		5.3 STREE	TADORESS	
CITY-ST-ZIP	W PALM BOH FL		5.4 CITY-S	T-ZIP	
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME	[* ·		6.2 NAME		·
ľ	İ		6.3 STREE	TADDRESS	•
STREET ADDRESS			SACITY S		

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 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, with all other like empowered.

SIGNATURE:

REQUIRED offrey Newsome

561-964-6983