

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 729340

**Entity Name:** CHALFONTE CONDOMINIUM APARTMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

550 SOUTH OCEAN BLVD.  
BOCA RATON, FL 33432

**Current Mailing Address:**

550 SOUTH OCEAN BLVD.  
BOCA RATON, FL 33432

**FEI Number:** 59-1555340

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BACKER LAW FIRM  
550 SOUTH OCEAN BLVD.  
BOCA RATON, FL 33432 US

*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.*

**SIGNATURE:** KEITH BACKER

04/30/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VICE PRESIDENT, VP

Name SOLOF, CAROLEE

Address 550 S OCEAN BLVD

City-State-Zip: BOCA RATON FL 33432

Title PRESIDENT

Name HERMAN , LAWRENCE

Address 550 SOUTH OCEAN BLVD.

City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR

Name MARCOSKY, JOHN

Address 550 SOUTH OCEAN BLVD.

City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR

Name FRIED, JOANNE

Address 550 SOUTH OCEAN BLVD.

City-State-Zip: BOCA RATON FL 33432

Title TREASURER

Name REEVES, ROBERT

Address 550 SOUTH OCEAN BLVD.

City-State-Zip: BOCA RATON FL 33432

Title SECRETARY

Name RAMUNNO, LORRAINE

Address 550 SOUTH OCEAN BLVD.

City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR

Name RABADAN, EDUARDO

Address 550 SOUTH OCEAN BLVD

City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR

Name WHEELER, CHRIS

Address 550 SOUTH OCEAN BLVD

City-State-Zip: BOCA RATON FL 33432

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LAWRENCE HERMAN

GM

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	LEVY, ISAAC
Address	550 SOUTH OCEAN BLVD.
City-State-Zip:	BOCA RATON FL 33432