

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 729340

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

**FILED**  
**Feb 26, 2020**  
**Secretary of State**  
**7944124593CC**

**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:**

ROGERS, STEVE  
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:** STEVE ROGERS

02/26/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ROGERS, STEVE  
Address        550 S OCEAN BLVD  
City-State-Zip: BOCA RATON FL 33432

Title            VP  
Name            RAICHLE, WILLIAM  
Address        550 S OCEAN BLVD  
City-State-Zip: BOCA RATON FL 33432

Title            TREASURER  
Name            HERMAN, LAWRENCE  
Address        550 SOUTH OCEAN BLVD.  
City-State-Zip: BOCA RATON FL 33432

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

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

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

Title            SECRETARY  
Name            LONDONO, ANA  
Address        550 SOUTH OCEAN BLVD.  
City-State-Zip: BOCA RATON FL 33432

Title            DIRECTOR  
Name            MIRKIN, SEBASTIAN  
Address        550 SOUTH OCEAN BLVD  
City-State-Zip: BOCA RATON FL 33432

*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

**TREASURER**

02/26/2020

Electronic Signature of Signing Officer/Director Detail

Date