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: ROSEMARIE ANDREWS (SI	K)
SIGNATORE. ROSEMARE ANDREWS (SI	N)

TREASURER

03/19/2021 Date

86 CHATHAM D

WPB FL 33417

SACCO, DEBORAH

Address	93 CHATHAM D	Address	84 CHATHAM D
City-State-Zip:	WEST PALM BEACH FL 33417	City-State-Zip:	WEST PALM BEACH FL 33417
Title	DIRECTOR	Title	PRESIDENT
Name	SCIULLI, GIOVANNI	Name	PETT, IVANETTA
Address	75 CHATHAM D	Address	83 CHATHAM D
City-State-Zip:	WEST PALM BEACH FL 33417	City-State-Zip:	WEST PALM BEACH FL 33417
Title	SECRETARY		
THE	OE ORE FART		
Name	SCIULLI, JO ELLEN		

Title

Name

### **Officer/Director Detail :**

VP

Title

I

Address

City-State-Zip:

Name

SACCO, DEBBIE 93 CHATHAM D WEST PALM BEA	CH, FL 33417 US
The above named er	ntity submits this statement for the purpose of changing its registered office of
SIGNATURE:	DEBBIE SACCO
	Electronic Signature of Registered Agent

## WEST PALM BEACH, FL 33409 US

## Name and Address of Current Registered Agent:

FEI Number: 59-1819319

SA

**DOCUMENT# 742425** 

Entity Name: CHATHAM D CONDOMINIUM ASSOCIATION, INC.

### **Current Principal Place of Business:**

93 CHATHAM D WEST PALM BEACH, FL 33417

### **Current Mailing Address:**

CHATHAM D C/O SEACREST SERVICES INC 2101 CENTREPARK W DR STE 110

# 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Signing Officer/Director Detail

FILED Mar 19, 2021 Secretary of State 2172891783CC

Certificate of Status Desired: No

or registered agent, or both, in the State of Florida.

TREASURER

ANDREWS, ROSEMARIE

Date

03/19/2021