

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 742434

**Entity Name:** CHATHAM N CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

284 CHATHAM N  
WEST PALM BEACH, FL 33417

**Current Mailing Address:**

CHATHAM N C/O SEACREST SERVICES INC  
2101 CENTREPARK W DR #110  
WEST PALM BEACH, FL 33409 US

**FEI Number:** 59-1622527

**Certificate of Status Desired:** No

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

SPADOFORA, LUCIA  
284 CHATHAM N  
WEST PALM BEACH, FL 33417 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:** LUCIA SPADOFORA

09/07/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name SANTOS, MARIA  
Address 268 CHATHAM N  
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR  
Name CANEPPA, NURY  
Address 275 CHATHAM N  
City-State-Zip: WEST PALM BEACH FL 33417

Title SECRETARY  
Name BONO, LORRAINE  
Address 281 CHATHAM N  
City-State-Zip: WPB FL 33417

Title TREASURER  
Name THORRY, MARIANNE MAZZO  
Address 265 CHATHAM N  
City-State-Zip: WPB FL 33417

Title DIRECTOR  
Name BARTON, CHERYL  
Address 280 CHATHAM N  
City-State-Zip: WEST PALM BEACH FL 33417

Title VP  
Name SPADOFORA, LUCIA  
Address 284 CHATHAM N  
City-State-Zip: WEST PALM BEACH FL 33467

*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:** MARIANNE MAZZO THORRY

**TREASURER**

09/07/2021

Electronic Signature of Signing Officer/Director Detail

Date