2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 751507

Entity Name: CHANDLERS FORDE CONDOMINIUM ASSOCIATION, INC.

FILED Apr 12, 2019 Secretary of State 4457834024CC

Current Principal Place of Business:

C/O LIGHTHOUSE PROPERTY MANAGEMENT

16 CHURCH STREET OSPREY, FL 34229

Current Mailing Address:

C/O LIGHTHOUSE PROPERTY MANAGEMENT 16 CHURCH STREET OSPREY, FL 34229 US

FEI Number: 59-2007509 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BREUER, ELIZABETH C/O LIGHTHOUSE PROPERTY MANAGEMENT 16 CHURCH STREET OSPREY, FL 34229 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: ELIZABETH BREUER 04/12/2019

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **TREASURER** Title VΡ

Name BREUER, LIZ Name COSTANT, DAN

16 CHURCH STREET C/O LIGHTHOUSE PROPERTY Address Address

MANAGEMENT City-State-Zip: OSPREY FL 34229

16 CHURCH STREET

OSPREY FL 34229 City-State-Zip: Title **DIRECTOR**

Name RICHTER, JAY Title **PRESIDENT**

C/O LIGHTHOUSE PROPERTY Name SCHAEFER, MARK Address

MANAGEMENT Address C/O LIGHTHOUSE PROPERTY 16 CHURCH STREET

MANAGEMENT City-State-Zip:

OSPREY FL 34229 16 CHURCH STREET

City-State-Zip: OSPREY FL 34229 **SECRETARY**

Title GARTNER, JOHN Name

Address C/O LIGHTHOUSE PROPERTY **MANAGEMENT**

16 CHURCH STREET City-State-Zip: OSPREY FL 34229

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.

04/12/2019 SIGNATURE: MARK SCHAEFER **PRESIDENT**

Date