

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003330

Entity Name: CHAPMAN PARTNERSHIP, INC.**Current Principal Place of Business:**1550 NORTH MIAMI AVENUE
MIAMI, FL 33136**Current Mailing Address:**1550 N MIAMI AVE
MIAMI, FL 33136 US**FEI Number:** 65-0425069**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HANSEL, SCOTT PRESIDENT/CEO
1550 N MIAMI AVE
MIAMI, FL 33136 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:** SCOTT HANSEL

01/26/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIR EMERITUS
Name BELL, TRISH
Address 457 LEUCADENDRA DRIVE
City-State-Zip: CORAL GABLES FL 33156

Title CHAIRMAN
Name JOYCE, EDWARD
Address 1341 ALHAMBRA CIRCLE
City-State-Zip: CORAL GABLES FL 33134

Title CHAIR ELECT
Name CECH SAMOLE, BRIGID
Address 333 SOUTHEAST 2ND AVE.
SUITE 4400
City-State-Zip: MIAMI FL 33131

Title SECRETARY
Name CRABTREE, BONNIE
Address 4233 ROYAL PALM AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title TREASURER
Name FERNANDEZ-GUZMAN, CARLOS
Address 1390 BRICKELL AVENUE
400
City-State-Zip: MIAMI FL 33131

Title PRESIDENT
Name HANSEL, SCOTT
Address 1550 N MIAMI AVE
2ND FLOOR, ADMINISTRATION
City-State-Zip: MIAMI FL 33136

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: SCOTT HANSEL

PRESIDENT

01/26/2024

Electronic Signature of Signing Officer/Director Detail

Date