2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742432

FILED Feb 23, 2005 Secretary of State

Entity Name: CHATHAM L CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

235 CHATHAM L

WEST PALM BEACH, FL 33417 US

Current Mailing Address: New Mailing Address:

235 CHATHAM L

WEST PALM BEACH, FL 33417 US

FEI Number: 59-1821965 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KLEIN, MADELINE
235 CHATHAM L
235 CHATHAM L
235 CHATHAM L

WEST PALM BEACH, FL 33417 US 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: MADELINE TOLISH 02/23/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: TD (X) Change() Addition

 Name:
 SHEFFRIN, MARTHA
 Name:
 SKIVER, SHIRLEY

 Address:
 CHATHAM L-241 CEN VILL
 Address:
 236 CHATHAM L

City-St-Zip: W PALM BEACH, FL City-St-Zip: W PALM BEACH, FL 33417

Title: PD () Delete Title: () Change () Addition

 Name:
 MADELINE, TOLISH
 Name:

 Address:
 235 CHATHAM L
 Address:

Address: 255 CHATHAM L Address: City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 SAXON, MICHAELE
 Name:

 Address:
 237 CHATHAM L
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33417
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 SAXON, DAVID
 Name:

 Address:
 237 CHATHAM L
 Address:

 City-St-Zip:
 W PALM BCH, FL 33417
 City-St-Zip:

Title: DD () Delete Title: DD (X) Change () Addition

 Name:
 POLANSKY, SIDNEY
 Name:
 LITTLE, LEROY

 Address:
 233 CHATHAM L
 Address:
 244 CHATHAM L

City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33417

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MADELINE TOLISH PD 02/23/2005