

# **2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 742432

**FILED**  
**Sep 29, 2014**  
**Secretary of State**

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

**Current Principal Place of Business:**

237 CHATHAM L  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

**Current Mailing Address:**

237 CHATHAM L  
WEST PALM BEACH, FL 33417 US

**New Mailing Address:**

**FEI Number:** 59-1821965

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GALLAGHER, PHILIP  
905 NW 10TH ST.  
BOYNTON BCH, FL 33426 US

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

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: PHIL GALLAGHER

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: TD  
Name: MARCUCCI, STEPHAN  
Address: 236 CHATHAM L  
City-St-Zip: W PALM BEACH, FL 33417

Title: PD  
Name: SAXON, MICHAELE  
Address: 237 CHATHAM L  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: SD  
Name: WHITNEY, MILES  
Address: 239 CHATHAM L  
City-St-Zip: W PALM BCH, FL 33417

Title: PD  
Name: FARGNOLI, DOMENICO  
Address: 247 CHATHAM L  
City-St-Zip: WEST PALM BEACH, FL 33417

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: MICHAELE SAXON

PD

09/29/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date