

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742436

FILED
Jan 09, 2007
Secretary of State

Entity Name: CHATHAM P CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

CHATHAM P
319 CHATHAM P
WEST PALM BEACH, FL 33417 US

New Principal Place of Business:

Current Mailing Address:

CHATHAM P
319 CHATHAM P
WEST PALM BEACH, FL 33417 US

New Mailing Address:

FEI Number: 59-1819658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MC CUE, MARIE
319 CHATHAM P
WEST PALM BEACH, FL 33417 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GENTILE, PETER
Address: 321 CHATHAM P
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Delete
Name: HOCH, BERNARD
Address: 322 CHATHAM P
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Delete
Name: MANICH, DORIS
Address: 317 CHATHAM P
City-St-Zip: WEST PALM BEACH, FL 33417

Title: T () Delete
Name: GURNEY, HERB
Address: 313 CHATHAM P
City-St-Zip: WEST PALM BEACH, FL 33417

Title: VP () Delete
Name: SEINBERGER, GERALD
Address: 334 CHATHAM P
City-St-Zip: WEST PALM BEACH, FL 33417

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC () Change (X) Addition
Name: MARGET, CAROL
Address: 326 CHATHAM P
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 Chapter 119, 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: HERB GURNEY

T

01/09/2007

Electronic Signature of Signing Officer or Director

Date