

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755919

FILED
Feb 23, 2009
Secretary of State

Entity Name: CHANTECLAIR VILLAS CONDOMINIUM ASSOCIATION NUMBER THREE, INC.

Current Principal Place of Business:

1545 PALMLAND DRIVE
BOYNTON BCH, FL 33436 US

New Principal Place of Business:

Current Mailing Address:

1545 PALMLAND DRIVE
BOYNTON BCH, FL 33436 US

New Mailing Address:

FEI Number: 59-2153836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASCHKENAS, SANDRA
1572 PALM LAND DR
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

SEKULICH, MARIE
1534 PALMLAND DR.
BOYNTON BEACH, FL 33436 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: MARIE SEKULICH

02/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ASCHKENAS, SANDRA
Address: 1572 PALM LAND DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VD () Delete
Name: MCATEER, JOHN
Address: 1566 PALM LAND DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VD () Delete
Name: WOLK, CAROL
Address: 1565 PALMLAND DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: SD () Delete
Name: SEKULICK, MARIE
Address: 1534 PALM LAND DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: TD () Delete
Name: FRIDERICH, FLORENCE
Address: 1529 PALMLAND DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SEKULICH, MARIE
Address: 1534 PALMLAND DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VD (X) Change () Addition
Name: WOLK, CAROL
Address: 1565 PALMLAND DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VD (X) Change () Addition
Name: REICHENBACH, FRANCES
Address: 1538 PALMLAND DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: SD (X) Change () Addition
Name: HANN, CORIN
Address: 1524 PALMLAND DR
City-St-Zip: BOYNTON BEACH, FL 33436

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

I hereby certify that the information supplied with this filing does not qualify 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: FLORENCE FRIDERICH

TD

02/23/2009

Electronic Signature of Signing Officer or Director

Date