

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 755920 (6)
1. Corporation Name
CHANTECLAIR VILLAS CONDOMINIUM ASSOCIATION NUMBER TWO, INC.

Principal Place of Business Mailing Address
1600 PALMLAND DRIVE 1600 PALMLAND DRIVE
BOYNTON BCH FL 33436 BOYNTON BCH FL 33436

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified 01/16/1981 3a. Date of Last Report 06/17/1994
4. FEI Number 59-2173462 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes X No

9. Name and Address of Current Registered Agent

MARSH, EDWARD
1618 PALMLAND DRIVE
BOYNTON BEACH FL 33436

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME MARSH, EDWARD
STREET ADDRESS 1618 PALMLAND DRIVE
CITY-ST-ZIP BOYNTON BEACH, FL 00000
TITLE V
NAME TOLIVE, MICHAEL
STREET ADDRESS 1653 PALMLAND DR.
CITY-ST-ZIP BOYNTON BEACH, FL 00000
TITLE T
NAME SELIGSON, BERNARD
STREET ADDRESS 1637 PALMLAND DR.
CITY-ST-ZIP BOYNTON BEACH, FL 00000
TITLE D
NAME BERNSTEIN, DAVE
STREET ADDRESS 1687 PALMLAND DR.
CITY-ST-ZIP BOYNTON BEACH, FL 00000
TITLE SD
NAME REDDEN, GEORGE
STREET ADDRESS 1635 PALMLAND DRIVE
CITY-ST-ZIP BOYNTON BEACH, FL 00000
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE Bernard Seligson BERNARD SELIGSON 3/3/95 407-736-0174
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (typed Name)