

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **755920** (6)

1. Corporation Name

**CHANTECLAIR VILLAS CONDOMINIUM ASSOCIATION NUMBE
R TWO, INC.**

Principal Place of Business

Mailing Address

**1600 PALMLAND DRIVE
BOYNTON BCH FL 33436**

**1600 PALMLAND DRIVE
BOYNTON BCH FL 33436**



3. Date Incorporated or Qualified

01/16/1981

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No **Condo**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**REDDEN, JEANNE B
1635 PALMLAND DR.VE
BOYNTON BEACH FL 33436**

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-1-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE

NAME **ALBERT STALL**
STREET ADDRESS **1626 PALMLAND DR.**
CITY-ST-ZIP **BOYNTON BCH. FL**

TITLE **VP** ☐ DELETE

NAME **DAVID BERNSTEIN**
STREET ADDRESS **1667 PALMLAND DR.**
CITY-ST-ZIP **BOYNTON BEACH F**

TITLE **T** ☐ DELETE

NAME **REDDEN, JEANE B**
STREET ADDRESS **1635 PALMLAND DR.**
CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE **SD** ☐ DELETE

NAME **TAYLOR, EMILY C**
STREET ADDRESS **1651 PALMLAND DR.**
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE **D** ☐ DELETE

NAME **NORMAN ADLER**
STREET ADDRESS **1606 PALMLAND DR.**
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE ☐ DELETE

NAME **No Changes 1998**
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

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

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

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

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address.

SIGNATURE:

Jeane B. Redden

JEANNE B. REDDEN

Treasurer 3-1-98

(S) 136-187

CR2E037 (10/97)