

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Feb 16, 2001 8:00 am
Secretary of State

02-16-2001 90019 024 ****61.25

0052543

DOCUMENT # 755920

1. Entity Name

CHANTECLAIR VILLAS CONDOMINIUM ASSOCIATION NUMBER II

Principal Place of Business

**1600 PALMLAND DRIVE
BOYNTON BCH FL 33436**

Mailing Address

**1600 PALMLAND DRIVE
BOYNTON BCH FL 33436**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2173462

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT TOLIVE, MICHAEL 1651 PALMLAND DR. BOYNTON BEACH FL 33436	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT SCHLICHER, JAMES 1631 PALMLAND DR BOYNTON BEACH FL 33436	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T REDDEN, GEORGE E 1635 PALMLAND DR. BOYNTON BEACH FL 33436	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DEPOTO, BERNICE 1659 PALMLAND DR BOYNTON BEACH FL 33436	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TURNBAUGH, THOMAS 1656 PALMLAND DR. BOYNTON BEACH FL 33436	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT PT THOMAS TURNBAUGH 1656 PALMLAND DR BOYNTON Bch, FL. 33436	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V-P VT WALSH, MARGARET 1660 PALMLAND DR. BOYNTON Bch, FL. 33436	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T. SAME	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SAME	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELLOS-SANTOS, NORA 1654 PALMLAND DR. BOYNTON Bch, FL. 33436	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(TREAS)

2/13/2001

Daytime Phone #

CR2E037 (10/00)