

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770538

FILED
Mar 20, 2009
Secretary of State

Entity Name: CHANTECLAIRE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2848 PROCTOR RD
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

2848 PROCTOR RD
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 59-2344284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER MANAGEMENT SERVICES, INC
2848 PROCTOR RD
SARASOTA, FL 34231 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: TD () Delete
Name: BANKAUF, WILLIAM
Address: 5474 CHANTECLAIRE
City-St-Zip: SARASOTA, FL 34235

Title: SD () Delete
Name: EPLER, LOREN
Address: 5449 CHANTELCLAIRE
City-St-Zip: SARASOTA, FL 34235

Title: D () Delete
Name: STAVONE, WAYNE
Address: 5451 CHANTERCLAIRE
City-St-Zip: SARASOTA, FL 34235

Title: PD () Delete
Name: DONETTI, ROBERT
Address: 5475 CHANTERCLAIRE
City-St-Zip: SARASOTA, FL 34235

Title: VD () Delete
Name: MCINTYRE, JOYCE
Address: 5445 CHANTECLAIRE
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: BANKAUF, WILLIAM
Address: 5474 CHANTECLAIRE
City-St-Zip: SARASOTA, FL 34235 US

Title: SD (X) Change () Addition
Name: EPLER, LOREN
Address: 5449 CHANTELCLAIRE
City-St-Zip: SARASOTA, FL 34235 US

Title: D (X) Change () Addition
Name: STAVONE, WAYNE
Address: 5451 CHANTERCLAIRE
City-St-Zip: SARASOTA, FL 34235 US

Title: PD (X) Change () Addition
Name: DONETTI, ROBERT
Address: 5475 CHANTERCLAIRE
City-St-Zip: SARASOTA, FL 34235 US

Title: VD (X) Change () Addition
Name: MCINTYRE, JOYCE
Address: 5445 CHANTECLAIRE
City-St-Zip: SARASOTA, FL 34235 US

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: WILLIAM F. BANKAUF

TREA

03/20/2009

Electronic Signature of Signing Officer or Director

Date