

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03192

FILED
Feb 09, 2009
Secretary of State

Entity Name: CHATEAU DE MER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

CHATEAU DE MER
3215 NO. OCEAN # 103
HOLLYWOOD, FL 33019

New Principal Place of Business:

Current Mailing Address:

CHATEAU DE MER
PO BOX 306
DANIA, FL 33004 US

New Mailing Address:

FEI Number: 59-2490488 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

YORRA, LILA
4201 NO. OCEAN DRIVE
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

YORRA, LILA
4201 NO. OCEAN DRIVE
APT 503
HOLLYWOOD, FL 33019 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: _____

02/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WOODS, MARY LOU
Address: 1623 EAST LAKE WAY
City-St-Zip: WESTON, FL 33326

Title: S () Delete
Name: SACCO, FRANK
Address: 1432 TRILLO AVE
City-St-Zip: MIAMI, FL 331463313

Title: TD () Delete
Name: CICCIA, NANCY
Address: 3215 N OCEAN DR #103
City-St-Zip: HOLLYWOOD, FL 33019

Title: PD () Delete
Name: MESA, ADRIAN
Address: 7101 SW 2ND CT
City-St-Zip: PEMBROKE PINES, FL 33023

Title: 2VP () Delete
Name: RODRIGUEZ, FELIX
Address: 7705 SW 86TH ST, APT B-213
City-St-Zip: MIAMI, FL 33143

Title: 2T () Delete
Name: MERLANO, RIMA
Address: 3215 N OCEAN DR
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: ADRIAN MESA

PRES

02/09/2009

Electronic Signature of Signing Officer or Director

Date