

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **N05887** (7)

1. Corporation Name

**THE CHARTER CLUB OF PALM BEACH CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

**200 FOXTAIL DR  
WEST PALM BEACH FL 33415**

**200 FOXTAIL DR  
WEST PALM BEACH FL 33415**

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

3. Date Incorporated or Qualified  
**10/26/1984**

3a. Date of Last Report  
**04/05/1995**

4. FEI Number  
**59-2469338**

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**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☒ No

10. Name and Address of New Registered Agent

**GALLAGHER, JOHN  
204 B2 FOXTAIL DRIVE  
WEST PALM BEACH FL 33415**

81 Name  
**HERBERT MILLER**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**3503 Ridge Tree Court**  
83  
84 City  
**Greenacres,** **FL** 85 Zip Code  
**33463**

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: **HERBERT MILLER**

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

(NOTE: Registered Agent Signature required when reinstating)

**4-25-96**

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE  
NAME **GALLAGHER, JOHN**  
STREET ADDRESS **204 B2 FOXTAIL DRIVE**  
CITY-ST-ZIP **WEST PALM BEACH FL**

1.1 TITLE **PD** ☒ Change ☐ Addition  
1.2 NAME **HERBERT MILLER**  
1.3 STREET ADDRESS **3503 Ridge Tree Court**  
1.4 CITY-ST-ZIP **Greenacres, FL.33463**

TITLE **VD** ☐ DELETE  
NAME **ROWLEY, ROBERT A**  
STREET ADDRESS **201 H-1 FOXTAIL DR.**  
CITY-ST-ZIP **WEST PALM BEACH FL**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE **VD** ☒ DELETE  
NAME **MILLER, HERBERT**  
STREET ADDRESS **209 B1 FOXTAIL DR**  
CITY-ST-ZIP **WEST PALM BCH FL**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE **VD** ☐ DELETE  
NAME **JANOSKI, FRANK**  
STREET ADDRESS **204 B1 FOXTAIL DR**  
CITY-ST-ZIP **W. PALM BEACH FL**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE **TD** ☐ DELETE  
NAME **MILLER, ELEANOR**  
STREET ADDRESS **206 F2 FOXTAIL DR**  
CITY-ST-ZIP **WEST PALM BCH FL**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE **S** ☐ Change ☒ Addition  
6.2 NAME **JULIAN BARTOLINI**  
6.3 STREET ADDRESS **205-F1 FOXTAIL DRIVE**  
6.4 CITY-ST-ZIP **WEST PALM BEACH, FL. 33415**

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 119.07(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 on an attachment with an address.

SIGNATURE: **Herbert Miller** **HERBERT MILLER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-25-96**

Date

Daytime Phone #

CR2E037 (12/95)