2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05887

FILED Apr 06, 2004 Secretary of State

Entity Name: THE CHARTER CLUB OF PALM BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:				
200 FOXTAIL DR WEST PALM BEACH, FL 33415				2328 S CONGRESS AVE SUITE I-C WEST PALM BEACH, FL 33406 US				
Current Mailing Address:				New Mailing Address:				
200 FOXTAIL DR WEST PALM BEACH, FL 33415				2328 S CONGRESS AVE SUITE 1-C WEST PALM BEACH, FL 33406 US				
FEI Number:	59-2469338	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate	of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
HILLEY, V. DONALD 860 U.S. HIGHWAY ONE SUITE 108 NORTH PALM BEACH, FL 33408 US				HILLEY, DONALD V 860 U.S. HIGHWAY ONE SUITE 108 NORTH PALM BEACH, FL 33408 US				
The above in the State		ubmits this statement for the pu	urpose o	f changing it	s registered of	fice or reg	istered agent, or	both,
SIGNATURE: DONALD V. HILLEY				04/06/2004				
	Electronic	Signature of Registered Age	nt			Da	ate	
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGES	TO OFFIC	ERS AND DIRE	CTORS:
Title: Name: Address: City-St-Zip:	STD () E PETRUCCI, BEA' 204 FOXTAIL DR WEST PALM BEA	., #G2		Title: Name: Address: City-St-Zip:	()	Change ()	Addition	
Title: Name: Address: City-St-Zip:	PD () E SULLIVAN, JACK 205 FOXTAIL DR WEST PALM BEA	. #F3		Title: Name: Address: City-St-Zip:	()	Change ()	Addition	
Title: Name: Address: City-St-Zip:	VPD () CAPPS, DAWN 209 FOXTAIL DR WEST PALM BEA			Title: Name: Address: City-St-Zip:	()	Change ()	Addition	
Title: Name: Address: City-St-Zip:	()[Delete		Title: Name: Address: City-St-Zip:	D () SULLIVAN, HEA 205 FOXTAIL D WEST PALM BE	R #F3		
Title: Name: Address: City-St-Zip:	()[Delete		Title: Name: Address: City-St-Zip:	D () JONES, ANDRE 205 FOXTAIL D WEST PALM BE	R #C2		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JACK SULLIVAN P 04/06/2004