2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 30, 2006 8:00 am Secretary of State DOCUMENT # N15216 03-30-2006 90033 011 ****70.00 1. Entity Name CHARTER CAY CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 21045 COMMERCIAL PARK 21045 COMMERCIAL PARK **BOCA RATION FL 33486 BOCA RATION FL 33486** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2610758 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WILLIAM K. ISAAĆSON Street Address (P.O. Box Number is Not Acceptable) 21045 COMMERCIAL PARK **BOCA RATION FL 33486** Zip Code 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be \Box Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. ☐ Change Addition Delete TITLE TITLE BOOK, FAITH NAME NAME STREET ADDRESS 19861-C PLANTERS BLVD STREET ADDRESS BOCA RATON FL 33434 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition RACKSON, CHESTER MALIC NAME 19884 B PLANTERS BLVD STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33434** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete ☐ Change ☐ Addition GREENFIELD, RICHARD NAME STREET ADDRESS STREET ADDRESS 19884-A PLANTERS BLVD. CITY-ST-7(P **BOCA RATON FL** CITY-ST-ZIP 5 TITLE ☐ Delete TITLE **Change** ☐ Addition ENGLENDER, MICHAEL NAME NAME STREET ADDRESS 19884-C PLANTERS BLVD STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33434** CITY-ST-ZIP SD Delete TITLE ☐ Change Addition TITLE CONRAD CAPG 19867-C PLANTERS BWO. ROSENBERG, MICHAEL NAME 19855-C PLANTERS BLVD STREET ADDRESS STREET ADDRESS BOCA RATON FL 33434 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, 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:

FILED