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May 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N22732 (4)
1. Corporation Name
THE CHARTER CLUB AT MARTIN DOWNS HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business: 2002 SW OLYMPIC CLUB TERR, PALM CITY FL 34980 US
Mailing Address: 2002 SW OLYMPIC CLUB TER, PALM CITY FL 34980-6023 US

3. Date Incorporated or Qualified: 09/29/1987
4. FEI Number: 65-0043823
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent
TEDDICK, EDWARD W
2174 S.W. OLYMPIC CLUB TER.
PALM CITY FL 34990

10. Name and Address of New Registered Agent
81 Name: RICHARD J. SWEENEY TREAS
82 Street Address (P.O. Box Number is Not Acceptable): 40 CHARTER CLUB
83: 2002 SW OLYMPIC CLUB TR
84 City: PALM CITY FL 85 Zip Code: 34990

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: Richard J. Sweeney, Treasurer, May 19 1998

12. OFFICERS AND DIRECTORS

TITLE: PD	CHEVALIER, BERNARD A.	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS: 2146 S.W. OLYMPIC CLUB TERR		
CITY-ST-ZIP: PALM CITY FL 34980-6025		
TITLE: VD	TRAINA, ELAINE	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS: 2197 SW OLYMPIC CLUB TERR		
CITY-ST-ZIP: PALM CITY FL 34980-6025		
TITLE: VD	TUCKER, MARTIN	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS: 2888 S.W. SHINNECOCK HILLS, CT		
CITY-ST-ZIP: PALM CITY FL 34990		
TITLE: SD	TEDDICK, EDWARD W	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS: 2174 S.W. OLYMPIC CLUB TER.		
CITY-ST-ZIP: PALM CITY FL		
TITLE: TD	KLEIN, DWIGHT L.	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS: 2299 SW SHOAL CREEK TRACE		
CITY-ST-ZIP: PALM CITY FL		
TITLE:		<input type="checkbox"/> DELETE
NAME:		
STREET ADDRESS:		
CITY-ST-ZIP:		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: PD	ATAS HERBERT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME:		
1.3 STREET ADDRESS: 2124 SW AUGUSTA TRACE		
1.4 CITY-ST-ZIP: PALM CITY FL 34990 6025		
2.1 TITLE: VP D	PETERS WILLIAM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME:		
2.3 STREET ADDRESS: 2274 SW OLYMPIC CLUB TER.		
2.4 CITY-ST-ZIP: PALM CITY 34990-6025		
3.1 TITLE: D	WARDLE William	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME:		
3.3 STREET ADDRESS: 2322 SW OLYMPIC CLUB TER.		
3.4 CITY-ST-ZIP: PALM CITY FL 34990		
4.1 TITLE: SD	WHITE JOHN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME:		
4.3 STREET ADDRESS: 2178 SW OLYMPIC CLUB TER.		
4.4 CITY-ST-ZIP: PALM CITY 34990-0625		
5.1 TITLE: TD	SWEENEY RICHARD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME:		
5.3 STREET ADDRESS: 2033 SW OLYMPIC CLUB TER.		
5.4 CITY-ST-ZIP: PALM CITY 34990-6025		
6.1 TITLE:		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME:		
6.3 STREET ADDRESS:		
6.4 CITY-ST-ZIP:		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 is Block 12 or Block 13 if changed, or on an attachment with an address.
SIGNATURE: [Signature] Date: 5/25/98 Daytime Phone #: 561 288 6314

CR2E037 (10/97)