


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90033 035 ****61.25

DOCUMENT # N24521 1. Entity Name THE CHATHAM AT ROTONDA CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 200 ROTONDA BOULEVARD WEST UNIT 5B ROTONDA WEST, FL 33947			Mailing Address 200 ROTONDA BOULEVARD WEST UNIT 5B ROTONDA WEST, FL 33947		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State Zip Country			City & State Zip Country		
4. FEI Number 59-2928857			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent DAVIS, PATRICIA A 200 ROTONDA BLVD WEST UNIT 5B ROTONDA WEST, FL 33947				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete <input type="checkbox"/>	
	D	D'AGOSTINO, DONNY	205 ROTONDA BLVD N, # B2 ROTONDA WEST, FL 33947		
	D	VALENTINE, ERIN	27 DEER RUN ANDOVER, NJ 07821		
	DP	MCMAMARA, PHIL	5505 CAMINO VIENTO NW ALBUQUERQUE, NM 87120		
	D	KILPATRICK, DANIEL	200 ROTONDA BLVD., #1A ROTONDA WEST, FL 33947		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Patricia A Davis</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>4-19-08</u> Daytime Phone # <u>941-764-5121</u>	