

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90051 028 ****61.25

DOCUMENT # N39621

1. Entity Name

CHATHAM SQUARE II, INC.



Principal Place of Business

4100 CORPORATE SQ.
STE 105
NAPLES FL 34104
US

Mailing Address

4100 CORPORATE SQ.
STE 105
NAPLES FL 34104
US

34060110



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0215008

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANCHOR ASSOCIATES, INC.
4100 CORPORATE SQ.
STE. 105
NAPLES FL 34104

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
CHARLAND, CLAIRE
6945 DENNIS CIRCLE I-301
NAPLES FL 34104 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VPD
DONALD PECK
6945-DENNIS CIRCLE I 207
NAPLES FL 34104 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
AVD
LASITA, JOE
7105 DENNIS CIR., E-205
NAPLES FL 34104 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
JOSEPH ORLANDO
6985 DENNIS CIRCLE H-306
NAPLES FL 34104 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
GLAZE, MAX
7025 DENNIS CIRCLE G-106
NAPLES FL 34104 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
BARBARA WALTERS
7105 DENNIS CIRCLE E-302
NAPLES FL 34104 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
MANNING, MARY
7065 DENNIS CIR F-106
NAPLES FL 34104 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
HALE, CAROLYN
7105 DENNIS CIRCLE E-305
NAPLES FL 34104 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
HALE, CAROLYN
7105 DENNIS CIRCLE E-305
NAPLES FL 34104 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
HALE, CAROLYN
7105 DENNIS CIRCLE E-305
NAPLES FL 34104 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
HALE, CAROLYN
7105 DENNIS CIRCLE E-305
NAPLES FL 34104 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
HALE, CAROLYN
7105 DENNIS CIRCLE E-305
NAPLES FL 34104 ☐ Delete

12. 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 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: *Barbara Walters*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 3/4/04 Daytime Phone #