

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740727

**FILED**  
**Mar 17, 2014**  
**Secretary of State**  
**CC8768159966**

**Entity Name:** CHATEAU ON THE KNOLL HOMEOWNERS ASSOCIATION,INC.

**Current Principal Place of Business:**

9393 SW 61ST WAY  
BOCA RATON, FL 33428

**Current Mailing Address:**

9393 SW 61ST WAY  
BOCA RATON, FL 33428

**FEI Number: 59-1963226**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SHIR, GUY M  
1800 NW CORPORATE BOULEVARD  
SUITE 200  
BOCA RATON, FL 33431 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            P  
Name            FAZIO, TRACY  
Address        9393 SW 61ST WAY  
City-State-Zip: BOCA RATON FL 33428

Title            S  
Name            FRAWLEY, KEVIN  
Address        9393 SW 61ST WAY  
City-State-Zip: BOCA RATON FL 33428

Title            T  
Name            KAUSMEYER, GARY  
Address        9393 SW 61ST WAY  
City-State-Zip: BOCA RATON FL 33428

Title            D  
Name            FOWLER, ERIK  
Address        9393 SW 61ST WAY  
City-State-Zip: BOCA RATON FL 33428

*I hereby 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 all other like empowered.*

**SIGNATURE: TRACY FAZIO**

**PRESIDENT**

**03/17/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date