

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755920

Entity Name: CHANTECLAIR VILLAS CONDOMINIUM ASSOCIATION
NUMBER TWO, INC.**FILED**
Apr 03, 2024
Secretary of State
8369618717CC**Current Principal Place of Business:**C/O 21 S.E. 5TH STREET
SUITE #200
BOCA RATON, FL 33432**Current Mailing Address:**C/O 21 S.E. 5TH STREET
SUITE #200
BOCA RATON, FL 33432 US**FEI Number: 59-2173462****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KONYK LAW PA
140 INTRACOASTAL POINTE DR
310
JUPITER, FL 33477 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:** CHELLE KONYK**04/03/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title VP
Name KNOESS, ELAINE
Address C/O 21 S.E. 5TH STREET
SUITE #200
City-State-Zip: BOCA RATON FL 33432Title PRESIDENT
Name ELLIS, PAMELA
Address C/O 21 S.E. 5TH STREET
SUITE #200
City-State-Zip: BOCA RATON FL 33432Title DIRECTOR
Name CAMPBELL, HARRIET
Address C/O 21 S.E. 5TH STREET
SUITE #200
City-State-Zip: BOCA RATON FL 33432Title DIRECTOR
Name CONTE, CARMINE
Address C/O 21 S.E. 5TH STREET
SUITE #200
City-State-Zip: BOCA RATON FL 33432Title SECRETARY, TREASURER
Name MATTHEW, BAKER
Address C/O 21 S.E. 5TH STREET
SUITE #200
City-State-Zip: BOCA RATON FL 33432

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: PAMELA ELLIS**PRESIDENT****04/03/2024**

Electronic Signature of Signing Officer/Director Detail

Date