## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39621

Entity Name: CHATHAM SQUARE II, INC.

**Current Principal Place of Business:** 

ANCHOR ASSOCIATES INC 3940 RADIO RD #112 NAPLES, FL 34104

## **Current Mailing Address:**

ANCHOR ASSOCIATES INC 3940 RADIO RD #112 NAPLES, FL 34104 US

FEI Number: 65-0215008 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ANCHOR ASSOCIATES, INC ANCHOR ASSOCIATES INC 3940 RADIO RD #112 NAPLES, FL 34104 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: FRANK COLUCCI 03/20/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** 

Name COLUCCI, FRANK Name O'LEARY, KATHLEEN

C/O ANCHOR ASSOCIATES INC C/O ANCHOR ASSOCIATES INC Address Address

3940 RADIO ROAD SUITE 112 3940 RADIO ROAD SUITE 112

City-State-Zip: NAPLES FL 34104 City-State-Zip: NAPLES FL 34104

Title **TREASURER** Title 1ST VICE PRESIDENT

Name WESLEY, HUGH Name RICCI, ROBERT

C/O ANCHOR ASSOCIATES INC C/O ANCHOR ASSOCIATES INC Address Address

3940 RADIO RD SUITE 112 3940 RADIO RD SUITE 112

City-State-Zip: NAPLES FL 34104 City-State-Zip: NAPLES FL 34104

Title 2ND VICE PRESIDENT

PUTT, RON Name

C/O ANCHOR ASSOCIATES INC Address

3940 RADIO RD SUITE 112

City-State-Zip: NAPLES FL 34104

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: FRANK COLUCCI

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

03/20/2019

**FILED** Mar 20, 2019

**Secretary of State** 

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