

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753696

FILED
Mar 04, 2009
Secretary of State

Entity Name: DELRAY LAKES ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O PHOENIX MGNT
4800 N. STATE ROAD 7 #105
LAUDERDALE LAKES, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

C/O PHOENIX MGNT
4800 N. STATE ROAD 7 #105
LAUDERDALE LAKES, FL 33319 US

New Mailing Address:

FEI Number: 59-2674063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDBERG, SHELDON
4800 N. STATE ROAD 7 #105
LAUDERDALE LAKES, FL 33319 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: BITTON, SAM
Address: 15464 TALL OAK AVE
City-St-Zip: DELRAY BEACH, FL 33446

Title: VP () Delete
Name: SKENIAN, MICHAEL
Address: 8619 SAWPINE RD
City-St-Zip: DELRAY BEACH, FL 33446

Title: S () Delete
Name: MANZIONE, LISA
Address: 15057 SWEETGUM STREET
City-St-Zip: DELRAY BEACH, FL 33446

Title: P () Delete
Name: YELLIN, MARK
Address: 8379 SAWPINE ROAD
City-St-Zip: DELRAY BEACH, FL 33446

Title: V () Delete
Name: KISLIN, DREW
Address: 8685 SAWPINE RD
City-St-Zip: DELRAY BEACH, FL 33446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARK YELLIN

P

03/04/2009

Electronic Signature of Signing Officer or Director

Date