

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 10, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 759298**

1. Entity Name

THE LANDINGS OF DELRAY BEACH CONDOMINIUM  
ASSOCIATION, INC.



Principal Place of Business

Mailing Address

790 ANDREWS AVENUE  
DELRAY BEACH FL 33483

790 ANDREWS AVENUE  
DELRAY BEACH FL 33483



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-2141888

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

MESCHES, LARRY M  
525 S FLAGLER DR  
#200  
WEST PALM BEACH FL 33401

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, 2008**

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

TITLE ☐ Delete  
NAME D LEE, BRADFORD  
STREET ADDRESS 790 ANDREWS AVE  
CITY-ST-ZIP DELRAY BCH FL

TITLE ☐ Delete  
NAME D GOTTLIEB, STUART  
STREET ADDRESS 790 ANDREWS AVE  
CITY-ST-ZIP DELRAY BCH FL

TITLE ☐ Delete  
NAME D FAY, KATHY  
STREET ADDRESS 790 ANDREWS AVENUE C103  
CITY-ST-ZIP DELRAY BEACH FL

TITLE ☐ Delete  
NAME P OELMAN, BRAD  
STREET ADDRESS 790 ANDREWS AVE  
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE ☐ Delete  
NAME T CROGAN, JACK C  
STREET ADDRESS 790 ANDREWS AVE  
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 1000006290352  
CITY-ST-ZIP 04/23/08-80006-007 61.25

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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

*[Signature]* JACK C CROGAN 4-4-08