## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name 766518

(5)

Mailing Address

## DOMAINE DELRAY ASSOCIATION, INC.

information indicated on this annual report or supplements I am an officer or director of the corneration or the receive appears in Block 12 or Block 11 ehanges, or on an attack

1405 South Federal HWY. P o Box 1222 Delray Beach Fl 33447-1222		1405 SOUTH FEDERAL HWY. P O BOX 1222 DELRAY BEACH FL 33447-1222				T			
	· · · · · · · · · · · · · · · · · · ·					3. Date Incorporated or Qualified 01/12/1983	3a. Date o	of Last Report 101/1996	i
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number 59-2283711		Applied	
21		26				09"2203/11		Not App	·
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	2	City & State		,		Election Campaign Financing     Trust Fund Contribution		\$5.00 May Added to Fe	
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for l	<del></del>		
24	25	29	30	-			Yes 🔲 N		
•••	9. Name and Address of Current					10. Name and Address of New Re	lstered Age	nt	
				<b>81</b> Na	ame				
JMD PRO	OPERTIES, INC.		ŀ	82 St	reet Addin	ess (P.O. Box Number is Not Acceptab	le)		
	STH AVENUE		l		ODI / ICIGI	obo (i .o. box (iambo) io iio iio iio piac	.0,		
	BEACH FL 33483		ſ	83					
			1	<b>84</b> Ci	ty		FL <sup>6</sup>	5 Zip Code	)
44 5		and C17 1500 Florida Statut	loo the of		mad sars	oration submits this statement for the p		anging its rec	rictored
office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State of familiar with, and accept the obligations are sections.	of Florida. Such change was a	authorized	I by the	corporati	ion's board of directors. I hereby accep	t the appoint	ment as regis	stered
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable (NOT	E: Registered	Agent sig	nature requir	ed when reinstating)	DATE		
12.	OFFICERS AND	) DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	PD	DELETE 1.		1.1 TITLE		<b>D</b>		Change 🔀	Addition
NAME	WAGNER, CORNELIUS JR.		1.2 NA	ME	V/	NHAITSMA, JENNI 05 8. Federal Huy.	FER		
STREET ADDRESS	1405 S. FED. HWY. #105		1.3 ST	reet addr	iess 14	os 8. Federal Hwy.	<b>₩</b> 100		
CITY-ST-ZIP	DELRAY BEACH FL		1.4 CI	Y-ST-ZIF	De	dray Beach, FL 33	<u> 483                                    </u>		<u></u>
1ITLE	DS	☐ DELETE	2.1 117	LE	D	,	L		Addition
NAME	Kurth, Jeane		2.2 NA	ME	3	as S. Federal Huy			
STREET ADDRESS	1405 S. FEDERA; HWY #122		2.3 ST	REET ADD	iess Jy	05 S. Federal Hwy	# 145		
CITY - ST - ZIP	DELRAY BEACH FL		2.4 C	TY-ST-ZI	P Dr	elrey Beach, FL'3	<u> 3483</u>		172 23
TITLE	D	☐ DELETE	3.1 TIT	LE	i	, ,	لسا	Change L	Addition
NAME	SWISTAK, LEO		3.2 NA	ME					
STREET ADDRESS	1405 S. FED. HWY 104		3.3 ST	REET ADDI	RESS				
CITY - S1 - ZIP	DELRAY BCH. FL		3.4. C	TY-ST-ZI	P				1
TITLE	ID D	☐ DELETE	4.1 TI	LE			×	Change	Addition
NAME	FLEISCHER, JANET		4.2 N	AME	F	LEISCHER, JANET			
STREET ADDRESS	1405 S. FED. HWY. #134		4.3 ST	REET ADD	RESS IY	05 S. Federal Huy.	# 137		
CITY - ST - ZIP	DELRAY BCH FL		4.4 CI	TY-\$T-ZIF	<u>, D</u>	elray Beach FL 3	<u>3483                                   </u>		4
TITLE	Q.	DELETE	5.1 Til	LE		,		Change	Addition
NAME	MURPHY, LINDA		5.2 NA	ME	l				
STREET ADDRESS	1405 S. FEDERAL HWY #160		5.3 ST	reet add	ress				
CITY-ST-ZIP	DELRAY BEACH FL		5.4 CF	TY - ST - ZIF	,		<u>-</u>		4
TITLE	DVP	DELETE	6.1 TI	LE				Change	Addition
NAME	MARINO, JOSEPH		6.2 N	ME					
STREET ADDRESS	1405 S. FED. HWY 127		6.3 ST	REET ADD	RESS				
CITY-S1-ZIP	DELRAY BCH FL		<u>6.4</u> CI	1Y-ST-ZII	٠ _				
44 Lala hara	by certify that the information supplied	with this filing dog fot qual	ify for the	exempl	ion stated	d in Section 119.07(3)(i), Florida Statute	s. I further ce	rtify that the	oath: #ho
intormatic Lam an c	on indicated on this annual report or sofficer or director of the c <u>ornoration of</u>	The receiver or transport	<del>wered</del> to e	Xecute	∍anu that Ngis repol	t my signature shall have the same legant as required by Chapter 617, Florida S	statutes; and	that my name	Jani, Ma B

**FILED** Apr 30 1997 8:00am Secretary of State

