

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 08, 2009  
Secretary of State**

DOCUMENT# N04000008407

Entity Name: MERIDIAN DELRAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

% PHOENIX MANAGEMENT  
3082 JOG ROAD  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

% PHOENIX MANAGEMENT  
3082 JOG ROAD  
LAKE WORTH, FL 33467

**New Mailing Address:**

FEI Number: 02-0763871      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROSENTHAL, DAVID  
%PHOENIX MANAGEMENT, INC  
3082 JOG ROAD  
LAKE WORTH, FL 33467 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: VPD ( ) Delete  
Name: GOODMAN, DAVID  
Address: 333 SG 6TH AVE #306  
City-St-Zip: DELRAY BEACH, FL 33483

Title: PD ( ) Delete  
Name: BURKHARDT, AL  
Address: PO BOX 274  
City-St-Zip: DEERFIELD BEACH, FL 33443

Title: STD ( ) Delete  
Name: ALIJEWICE, ALEX  
Address: 14105 TECOMA DR.  
City-St-Zip: WEST PALM BEACH, FL 33414

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: KATZ, ANDREW  
Address: 365 SE 6TH AVE #307  
City-St-Zip: DELRAY BEACH, FL 33483

Title: S (X) Change ( ) Addition  
Name: TIMMONS, MARY  
Address: 365 SE 6TH AVENUE, #401  
City-St-Zip: DELRAY BEACH, FL 33483

Title: T (X) Change ( ) Addition  
Name: MINARCHI, BOB  
Address: 335 SE 6TH AVENUE, #305  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Change (X) Addition  
Name: SCHWIMMER, LONNIE  
Address: 703 GOLF COURT  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D ( ) Change (X) Addition  
Name: CASTAGNOLO, CAROLINE  
Address: 335 SE 6TH AVENUE, #N208  
City-St-Zip: DELRAY BEACH, FL 33483

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: ANDREW KATZ

P

04/08/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date