2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002932

FILED May 11, 2010 Secretary of State

Entity Name: ALLIANCE OF DELRAY RESIDENTIAL ASSOCIATIONS, INC.

Current Principal Place of Business: New Principal Place of Business:

1499 W. PALMETTO PARK RD, 40 S.E. 5TH STREET,

SUITE 412 SUITE 610

BOCA RATON, FL 33486 US BOCA RATON, FL 33432 US

Current Mailing Address: New Mailing Address:

1499 W. PALMETTO PARK RD, 40 S.E. 5TH STREET,

SUITE 412 SUITE 610

BOCA RATON, FL 33486 US BOCA RATON, FL 33432 US

FEI Number: 65-0698232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GERSTIN, JOSHUA G ESQ
1499 W. PALMETTO PARK RD
40 S.E. 5TH STREET
SUITE 610

BOCA RATON, FL 33486 US BOCA RATON, FL 33432 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: 05/11/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: SCHULBAUM, ROBERT
Address: 15474 FIORENZA CIRCLE
City-St-Zip: DELRAY BEACH, FL 33446

Title: EVPD

Name: WALDEN, MARGE J

Address: C/0 40 S.E. 5TH STREET, SUITE 610

City-St-Zip: BOCA RATON, FL 33432

Title: VPD

Name: MAZOR, MORT

Address: C/0 40 S.E. 5TH STREET, SUITE 610

City-St-Zip: BOCA RATON, FL 33432

Title: VPD

Name: HERMAN, RICHARD

Address: C/0 40 S.E. 5TH STREET, SUITE 610

City-St-Zip: BOCA RATON, FL 33432

Title: SD

Name: SPIELHOLZ, EVELYN

Address: C/0 40 S.E. 5TH STREET, SUITE 610

City-St-Zip: BOCA RATON, FL 33432

Title:

Name: KALISH, STANLEY

Address: C/0 40 S.E. 5TH STREET, SUITE 610

City-St-Zip: BOCA RATON, FL 33432

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: ROBERT SCHULBAUM PD 05/11/2010