

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 17, 2009
Secretary of State**

DOCUMENT# N99000001423

Entity Name: WINDSOR COURT DELRAY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2295 NW CORPORATE BLVD.
138
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

2295 NW CORPORATE BLVD.
138
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 65-0962281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINSINBIGLER, KIMBERLY
2295 NW CORPORATE BLVD
138
BOCA RATON, FL 33431 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: STD () Delete
Name: HEFFERNAN, JAMES
Address: 10 GREEN GATES RD
City-St-Zip: MILLBROOK, NY 12545

Title: PD () Delete
Name: NAIL, CHARLES E
Address: 1026 BAY ST.
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP () Delete
Name: RASKAUSKAS, JOE
Address: POB 1509
City-St-Zip: BETHANY BEACH, DE 19930

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:

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: CHARLES NAIL

PD

02/17/2009

Electronic Signature of Signing Officer or Director

_____ Date