

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 723291

**FILED**  
**Feb 08, 2016**  
**Secretary of State**  
**CC7598914128**

**Entity Name:** HIGH POINT OF DELRAY BEACH CONDOMINIUM ASSOC. SEC. 4, INC.

**Current Principal Place of Business:**

824 CLUB DR.  
DELRAY BCH, FL 33445

**Current Mailing Address:**

824 CLUB DR.  
DELRAY BCH, FL 33445

**FEI Number: 59-1542004**

**Certificate of Status Desired: Yes**

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

BALEYKO, PAUL  
824 CLUB DR.  
DELRAY BCH, FL 33445 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: PAUL BALEYKO**

**02/08/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BALEYKO, PAUL  
Address        824 CLUB DR.  
City-State-Zip: DELRAY BCH FL 33445

Title            VP  
Name            GIOTOPOULOS, CAROL  
Address        824 CLUB DR.  
City-State-Zip: DELRAY BCH FL 33445

Title            ASST. SECRETARY  
Name            DOBSKI, ROBERT  
Address        824 CLUB DR.  
City-State-Zip: DELRAY BCH FL 33445

Title            TREASURER  
Name            GIL, JANICE  
Address        824 CLUB DR.  
City-State-Zip: DELRAY BCH FL 33445

Title            DIRECTOR  
Name            GLINSKY, HOWARD  
Address        824 CLUB DR.  
City-State-Zip: DELRAY BCH FL 33445

Title            SECRETARY  
Name            ERGENZINGER, MARIE  
Address        824 CLUB DR.  
City-State-Zip: DELRAY BCH FL 33445

Title            DIRECTOR  
Name            MAHONEY, JAKE  
Address        824 CLUB DRIVE  
City-State-Zip: DELRAY BEACH FL 33445

*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: PAUL BALEYKO**

**PRESIDENT**

**02/08/2016**

Electronic Signature of Signing Officer/Director Detail

Date