

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 741194

**FILED  
Mar 28, 2017  
Secretary of State  
CC5682317863**

**Entity Name:** DELRAY WEST TOWNHOUSES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

13290 VIA VULCANUS  
DELRAY BEACH, FL 33484

**Current Mailing Address:**

13188 VIA VESTA  
DELRAY BEACH, FL 33484 US

**FEI Number: 59-2069993**

**Certificate of Status Desired: No**

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

STEVEN R. BRATEN, P.A.  
4800 NORTH FEDERAL HIGHWAY STE 307  
BOCA RATON, FL 33431 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           PRES  
Name           KUHN, GEORGE  
Address       13464A VIA VESTA  
City-State-Zip: DELRAY BEACH FL 33484

Title           TREA  
Name           PRATT, PATRICIA  
Address       13067 VIA VESTA  
City-State-Zip: DELRAY BEACH FL 33484

Title           SEC  
Name           KRAHE, HOLLY  
Address       6071B VIA SILVANUS  
City-State-Zip: DELRAY BEACH FL 33484

Title           VP  
Name           ROSENMAN, ELLEN  
Address       13434A VIA VESTA  
City-State-Zip: DELRAY BEACH FL 33484

Title           DIRECTOR  
Name           AMSTERDAM, LYNN  
Address       13160 VIA VESTA  
City-State-Zip: DELRAY BEACH FL 33484

Title           DIRECTOR  
Name           MCCLOSKEY, SHARON  
Address       13367B VIA VESTA  
City-State-Zip: DELRAY BEACH FL 33484

Title           DIRECTOR  
Name           MARGILLO, WILLIAM  
Address       13178 VIA VESTA  
City-State-Zip: DELRAY BEACH FL 33484

Title           DIRECTOR  
Name           REDER, ED  
Address       13356B VIA VESTA  
City-State-Zip: DELRAY BEACH FL 33484

**Continues on page 2**

*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: PATRICIA PRATT**

**TREASURER**

**03/28/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           VENTURA, IDA  
Address        13279B VIA VULCANUS  
City-State-Zip: DELRAY BEACH FL 33484