

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

DOCUMENT# 746341

**Entity Name:** DELRAY VILLAS PLAT NO. 1 HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Jan 25, 2016**  
**Secretary of State**  
**CC5512628635**

**Current Principal Place of Business:**

14237 CAMPANELLI DR  
DELRAY BEACH, FL 33484

**Current Mailing Address:**

PO BOX 7228  
DELRAY BEACH, FL 33482 US

**FEI Number: 59-2079264**

**Certificate of Status Desired: No**

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

BALDWIN, WALLY ESQ.  
5405 OKEECHOBEE BLVD.  
SUITE 202  
WEST PALM BEACH, FL 33417 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 VP  
Name WILLIAMS, DAN  
Address 14183 CAMPANELLI DR  
City-State-Zip: DELRAY BEACH FL 33484

Title SECRETARY  
Name HOFFMAN, ELLEN  
Address 14253 CAMPANELLI DR  
City-State-Zip: DELRAY BEACH FL 33484

Title T  
Name SIEGEL, ETHEL  
Address 14237 CAMPANELLI DR  
City-State-Zip: DELRAY BEACH FL 33484

Title PRESIDENT  
Name PERITZMAN, MARLENE  
Address 14257 CAMPANELLI DR.  
City-State-Zip: DELRAY BEACH FL 33484

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: ETHEL SIEGEL**

**TREASURER**

**01/25/2016**

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

\_\_\_\_\_  
Date