

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766518

Entity Name: DOMAINE DELRAY ASSOCIATION, INC.**Current Principal Place of Business:**1405 SOUTH FEDERAL HWY.
DELRAY BEACH, FL 33483**Current Mailing Address:**904 SE 5TH AVENUE
DELRAY BEACH, FL 33483 US**FEI Number:** 59-2283711**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JMD PROPERTIES, INC.
904 SE 5TH AVENUE
DELRAY BEACH, FL 33483 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	PD
Name	KEYES, KATHLEEN
Address	1405 S. FEDERAL HWY #158
City-State-Zip:	DELRAY BEACH FL 33483

Title	TD
Name	RAS, DIRK
Address	1405 S. FEDERAL HWY #155
City-State-Zip:	DELRAY BEACH FL 33483

Title	VPSD
Name	ROMINES, CHRISTINE
Address	1405 S. FEDERAL HWY. #110
City-State-Zip:	DELRAY BEACH FL 33483

Title	D
Name	GAFFNEY, DEBORAH
Address	1405 S. FEDERAL HWY. #148
City-State-Zip:	DELRAY BEACH FL 33483

Title	D
Name	BELMONTE, JOHN
Address	1019 BROOKS LANE
City-State-Zip:	DELRAY BEACH FL 33483

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: KATHLEEN KEYES**BOARD PRESIDENT****03/16/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date