

2023 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 PRESIDENT
Name KEYES, KATHLEEN
Address 1405 S. FEDERAL HWY #158
City-State-Zip: DELRAY BEACH FL 33483

Title VP
Name GOEPFERT, STEVE
Address 1405 S. FEDERAL HWY #115
City-State-Zip: DELRAY BEACH FL 33483

Title SECRETARY
Name MARQUIS, DIANE
Address 1405 S. FEDERAL HWY. #119
City-State-Zip: DELRAY BEACH FL 33483

Title TREASURER
Name VONDERHEIDE, JAY
Address 1405 S. FEDERAL HWY. #105
City-State-Zip: DELRAY BEACH FL 33483

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

Title DIRECTOR
Name KERCHNER, GARY
Address 1405 S. FEDERAL HWY. #117
City-State-Zip: DELRAY BEACH FL 33483

Title DIRECTOR
Name BELMONTE, JOHN
Address 1405 S. FEDERAL HWY. #114
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**PRESIDENT****03/29/2023**

Electronic Signature of Signing Officer/Director Detail

Date