

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 767539

**Entity Name:** DELRAY COMMUNITY HOSPITAL VOLUNTEERS, INC.

**Current Principal Place of Business:**

5352 LINTON BLVD  
DELRAY BEACH, FL 33484

**Current Mailing Address:**

5352 LINTON BLVD  
DELRAY BEACH, FL 33484

**FEI Number:** 59-2351286

**Certificate of Status Desired:** No

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

MCCOY, BECKY  
5352 LINTON BLVD  
DELRAY BEACH, FL 33484 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 CORRESPONDING SECRETARY  
Name SKOP, CAROL  
Address 5223 ESTATES DRIVE  
City-State-Zip: DELRAY BEACH FL 33445

Title P  
Name GORDON, BERTHA  
Address 7828-A LEXINGTON CLUB BLVD  
City-State-Zip: DELRAY FL 33446

Title VP  
Name SOTSKY, JACK  
Address 7562 PEBBLE SHORES TERRACE  
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR  
Name CONOLLY, JEANETTE  
Address 4766 BRANDYWINE DR  
City-State-Zip: BOCA RATON FL 33487

*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:** BERTHA GORDON

**PRESIDENT**

**01/21/2020**

Electronic Signature of Signing Officer/Director Detail

Date