

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000009334

**Entity Name:** VIA PALMA DELRAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1220 DANBURY AVE  
DAVIE, FL 33325

**Current Mailing Address:**

4706 COCONUT CREEK PARKWAY  
#934312  
MARGATE, FL 33093 US

**FEI Number:** 20-2168166

**Certificate of Status Desired:** No

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

HALPIN, SUSAN  
3130 HOLIDAY SPRINGS BLVD  
311  
MARGATE, FL 33063 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 GUERRIERI, FRANK  
Address 14340 ARLINGTON PLACE  
City-State-Zip: DAVIE FL 33324

Title ST  
Name HALPIN, SUE  
Address 3130 HOLIDAY SPRINGS BLVD SUITE 311  
City-State-Zip: MARGATE FL 33063

Title D  
Name DUFFY, KEVIN  
Address 5445 VIA DELRAY  
City-State-Zip: DELRAY BEACH FL 33484

Title D  
Name KRANT, KAREN  
Address 5449 VIA DELRAY  
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR  
Name ESCOBAR, ANGIE  
Address 5383 VIA DELRAY  
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:** SUE HALPIN

ST

03/01/2013

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

\_\_\_\_\_  
Date