2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002932

Entity Name: ALLIANCE OF DELRAY RESIDENTIAL ASSOCIATIONS, INC.

FILED Feb 11, 2024 Secretary of State 8529036542CC

Current Principal Place of Business:

10290 WEST ATLANTIC AVE.

480504

DELRAY BEACH, FL 33448

Current Mailing Address:

10290 WEST ATLANTIC AVE.

#480504

DELRAY BEACH, FL 33448 US

FEI Number: 65-0698232 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GERSTIN, JOSHUA G. ESQ. 40 S.E. 5TH STREET SUITE 610

BOCA RATON, FL 33432 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: JOSHUA G. GERSTIN 02/11/2024

> Date Electronic Signature of Registered Agent

> > Title

Officer/Director Detail:

City-State-Zip:

Title PRESIDENT, DIRECTOR Title EXEC VICE PRESIDENT, DIRECTOR

Name VINIKOOR, LORI Name KATZ, ARNOLD

Address 10626 LA REINA ROAD Address 40 S.E. 5TH STREET

STE. 610

City-State-Zip: DELRAY BEACH FL 33446 City-State-Zip: BOCA RATON FL 33432

Title SECRETARY, DIRECTOR

TREASURER, DIRECTOR KLAUSNER, CAROL Name Name BORENSTEIN, DEBBIE

40 S.E. 5TH STREET, Address Address 40 S.E. 5TH STREET STE. 610

STE. 610

BOCA RATON FL 33432 City-State-Zip: BOCA RATON FL 33432

Title VP. DIRECTOR Title CHAIRMAN OF THE BOARD

Name ARNOLD, NORMA SCHULBAUM, ROBERT Name 40 S.E. 5TH STREET, Address

40 S.E. 5TH STREET, Address STE. 610

STE. 610 BOCA RATON FL 33432

City-State-Zip: City-State-Zip: BOCA RATON FL 33432

Title VP, DIRECTOR Title DIRECTOR

Name GENTITHES, JOHN Name ZUCKERMAN, SUSAN

Address 40 S.E. 5TH STREET, Address 40 S.E. 5TH STREET. STE. 610

STF, 610 BOCA RATON FL 33432

City-State-Zip: BOCA RATON FL 33432 City-State-Zip:

Continues on page 2

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.

02/11/2024 SIGNATURE: LORI VINIKOOR **PRESIDENT**

Officer/Director Detail Continued:

Title DIRECTOR

Name GOLDBERG, JUDITH

Address 40 SE 5TH ST.

STE. 610

City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR

Name BORRELLIE, SYLVIA Address 40 SE 5TH STREET

STE. 610

City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR
Name DREWS, KAY

Address 40 SE 5 TH STREET

STE. 610

City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR

Name CUSKADEN, ROBERT

Address 40 SE 5TH STREET

STE. 610

City-State-Zip: BOCA RATON FL 33432

Title DIRECTOR

Name FREUND, YORK

Address 40 SE 5 TH STREET STE. 610

City-State-Zip: BOCA RATON FL 33432