FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **205073** **(0)**

1. Corporation Name
DELRAY VILLAS, INC.

Principal Place of Business	Mailing Address
2225 S OCEAN BLVD DELRAY BEACH FL 33483	2225 S OCEAN BLVD DELRAY BEACH FL 33483-6430

3. Date Incorporated or Qualified: 08/14/1957
3a. Date of Last Report: 02/08/1996

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 / Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 / Country — 30

4. FEI Number: 60-0882050 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HENDERSON, LARRY
2225 S OCEAN BLVD
DELRAY BEACH FL 33483

10. Name and Address of New Registered Agent

81 Name: ROBERT C. WICZKOWSKI
82 Street Address (P.O. Box Number is Not Acceptable): 2225 S. OCEAN BLVD.
83
84 City: DELRAY BEACH **FL** 85 Zip Code: 33483

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Robert C. Wiczkowski — ROBERT C. WICZKOWSKI — 1/17/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE P	PRESIDENT	☒ Change ☐ Addition
NAME	DOBSKI, EDWIN J., DR.		1.2 NAME	ROBERT C. WICZKOWSKI	
STREET ADDRESS	2225 S OCEAN BLVD		1.3 STREET ADDRESS	2225 S. OCEAN BLVD	
CITY-ST-ZIP	DELRAY BCH, FL 00000		1.4 CITY-ST-ZIP	DELRAY BEACH, FL 33483	
TITLE	D	☒ DELETE	2.1 TITLE D	DIRECTOR	☒ Change ☐ Addition
NAME	HOLMES, JOHN F		2.2 NAME	JOHN F. KENNEALLY	
STREET ADDRESS	2225 S OCEAN BLVD		2.3 STREET ADDRESS	2225 S. OCEAN BLVD	
CITY-ST-ZIP	DELRAY BCH.,FL 00000		2.4 CITY-ST-ZIP	DELRAY BEACH, FL 33483	
TITLE	TD	☒ DELETE	3.1 TITLE T	TREASURER	☒ Change ☐ Addition
NAME	HAYMAN, VIRGINIA E.		3.2 NAME	BARBARA L. DOBSKI	
STREET ADDRESS	2225 S. OCEAN BLVD		3.3 STREET ADDRESS	6210 WAKING LN.	
CITY-ST-ZIP	DELRAY BEACH FL		3.4 CITY-ST-ZIP	WATERFORD, MI 48329	
TITLE	V	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	ALBERTIE, JAMES		4.2 NAME		
STREET ADDRESS	2225 S. OCEAN BLVD		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL		4.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	FORESETIER, POLLY		5.2 NAME		
STREET ADDRESS	2225 SOUTH OCEAN BLVD.		5.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Barbara L. Dobski — BARBARA L. DOBSKI — TREASURER — 4-15-97 — (810) 623-7824