2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# 713944

Entity Name: DELRAY COLONIAL, INC.

Current Principal Place of Business:

1001 N.E. 8TH AVENUE
DELRAY BCH, FL 33483

New Principal Place of Business:

Current Mailing Address:

JMD PROPERTIES, INC.
904 S E 5TH AVENUE
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 59-1318166 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JMD PROPERTIES, INC.
903 S E 5TH AVENUE
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ARDENTE, ROCCO
Address: 1001 NE 8TH ST #202
City-St-Zip: DELRAY BEACH, FL 33473

Title: VPD ( ) Delete
Name: HALEY, THOMAS
Address: 6552 PATIO LANE
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Delete
Name: FLOYD, LARRY
Address: 1001 NE 8TH STREET #206
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD ( ) Delete
Name: NESAW, FLORENCE
Address: 211 CHURCH LANE
City-St-Zip: SEWICKLEY, PA 15143

Title: TD ( ) Delete
Name: SINK, THOMAS
Address: 1001 NE 8TH STREET #116
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: KOSELA, FRANK
Address: 406 AMHEAST AVENUE
City-St-Zip: MOON TOWNSHIP, PA 15106

Title: D (X) Change ( ) Addition
Name: BANNON, PATRICIA M
Address: 1001 NE 8TH STREET #103
City-St-Zip: DELRAY BEACH, FL 33483

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: SINK, THOMAS
Address: 201 PILOTHOUSE PLACE
City-St-Zip: CAROLINA SHORE, NC 28467

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROCCO ARDENTE PD 02/05/2009

Electronic Signature of Signing Officer or Director — Date