

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 723292

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

**Entity Name:** HIGH POINT OF DELRAY BEACH CONDOMINIUM ASSOC. SEC.3, INC

**Current Principal Place of Business:**

804 CLUB DR.  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

804 CLUB DRIVE  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

804 CLUB DR.  
DELRAY BEACH, FL 33445

**New Mailing Address:**

804 CLUB DRIVE  
DELRAY BEACH, FL 33445

**FEI Number:** 59-1503590

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHAPNICK, MICHAEL E  
100 EAST LINTON BOULEVARD  
SUITE 502B  
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: P  
Name: SUMSKY, ROBERT  
Address: 907-B SOUTH DRIVE TERRACE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: ST  
Name: RIMICCI, PATRICIA  
Address: 925-A SOUTH DRIVE TERRACE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP  
Name: REARDEN, TERRANCE  
Address: 770-A HIGH POINT BLVD N  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D  
Name: MOUNTAIN, CONSTANCE  
Address: 750 D HIGH PT BLVD N  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D  
Name: SLOAN, J. NICHOLAS  
Address: 902-A SOUTH DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D  
Name: TALBOT, THOMAS  
Address: 830-A HIGHPOINT DRIVE WEST  
City-St-Zip: DELRAY BEACH, FL 33445

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: ROBERT SUMSKY

P

03/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date