

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 11, 2001 8:00 am
Secretary of State

05-11-2001 90045 006 ****61.25

DOCUMENT # 723946

1. Entity Name

DELRAY ESTATES ASSOCIATION, INC.

Principal Place of Business

2095 CATHERINE DRIVE
DELRAY BEACH FL 33445

Mailing Address

2095 CATHERINE DRIVE
DELRAY BEACH FL 33445

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1507467

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RENDA THOMAS
2095 CATHERINE DRIVE
DELRAY BEACH FL 33445

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Renda Thomas Renda Thomas, President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/24/01

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THOMAS, RENDA 3137 SHERWOOD BLVD DELRAY BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROCK, ANN 1612 CATHERINE DR, 1 DELRAY BCH FL 33445	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JARVIS, DEBBIE 133-B NW 16TH ST BOCA RATON FL 33445	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAINTER, JAMES 1300 N. FEDERAL HWY BOCA RATON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARE, JOSEPH 5148 N.W. 6TH COURT DELRAY BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MENKE, CLARENCE 2099 LINTON BLVD #4 DELRAY BCH FL 33445	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER JEAN-PIERRE, ANDRE 5077 N. W. 96TH DRIVE CORAL SPRINGS, FL 33076	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY JARVIS, DEBBIE 133-B NW 16TH ST BOCA RATON, FL 33433	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PARE, JOSEPH 15118 LOXAHATCHEE ROAD PARKLAND, FL 33076	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MENKE, CLARENCE 2099 LINTON BLVD #4 DELRAY BEACH, FL 33445	☒ Change ☐ Addition

12. I 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Renda Thomas Renda Thomas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/01

Date

(561) 272-5296

Daytime Phone #

CR2E037 (10/00)