

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 725516 (9)

1. Corporation Name

DELRAY BEACH CLUB APARTMENT ASSOCIATION, INC.



Principal Place of Business

Mailing Address

2000 SOUTH OCEAN BLVD.
DELRAY BEACH FL 33483-6484

2000 SOUTH OCEAN BLVD.
DELRAY BEACH FL 33483-6484

3. Date Incorporated or Qualified

02/09/1973

3a. Date of Last Report

03/31/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARDER, ROY B
2000 S. OCEAN BLVD.
10
DELRAY BCH. FL 33483

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent Signature required when resigning)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
RAY, MARGARET
2000 S OCEAN BLVD
DELRAY BCH, FL 00000

☒ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TA
MACLEOD WILLIAM
2000 SO.OCEAN BLVD.
DELRAY BCH., FL.33483

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

P
RICHARD GAGNON
2000 S OCEAN BLVD
DELRAY BCH, FL 00000

☒ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

VP
OTT CLAIRE
2000 S.OCEAN BLVD.
DELRAY BCH., FL.33483

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TDVP
REEF ARTHUR
2000 S OCEAN BLVD
DELRAY BCH, FL 00000

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

D
REEF ARTHUR
2000 S OCEAN BLVD.
DELRAY BCH., FL.33483

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SD
GILES, VIRGINIA
2000 S OCEAN BLVD
DELRAY BCH, FL 00000

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

SAME

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
CARDER, ROY
2000 S OCEAN BLVD
DELRAY BEACH FL

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

P
CARDER ROY
2000 S OCEAN BLVD.
DELRAY BCH., FL.33483

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TA
WILLIAM, CARTER
2000 S OCEAN BLVD
DELRAY BEACH FL

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

TVP
CARTER WILLIAM
2000 S. OCEAN BLVD.
DELRAY BCH, FL.33483

☒ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Signature and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM D. CARTER

Date

4-18-96 407 278-8181

Daytime Phone #

CR2E037 (12/95)