

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725516

1. Entity Name

DELRAY BEACH CLUB APARTMENT ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2000 SOUTH OCEAN BLVD.
DELRAY BEACH FL 33483

2000 SOUTH OCEAN BLVD.
DELRAY BEACH FL 33483

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

52-0981595

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

Name

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

City

FL

Zip Code

DAGHER, JOSEPH M
98 SE 6TH AVE
STE 2
DELRAY BCH. FL 33483

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

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

(NOTE: Registered Agent signature required when reinstating)

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 SD ☒ Delete
NAME FITZGIBBONS, ELEANOR
STREET ADDRESS 2000 S OCEAN BLVD
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE S ☐ Change ☒ Addition
NAME Catharin, Linda
STREET ADDRESS 2000 S. Ocean Blvd
CITY-ST-ZIP Delray Beach FL 33483

TITLE D ☐ Delete
NAME MARLEY, ROBERT
STREET ADDRESS 2000 S OCEAN BLVD #203
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME TAYLOR, SUE
STREET ADDRESS 2000 S OCEAN BLVD # 702
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPTD ☐ Delete
NAME HEALY-GOLEMBE, PATRICIA
STREET ADDRESS 2000 S OCEAN BLVD
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME FITZGIBBONS, ELEANOR K
STREET ADDRESS 2000 S OCEAN BLVD
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE D ☐ Change ☐ Addition
NAME Fitzgibbons, Eleanor
STREET ADDRESS 2000 S. Ocean Blvd
CITY-ST-ZIP Delray Beach FL 33483

TITLE P ☐ Delete
NAME LIERLE, NANCY
STREET ADDRESS 2000 S OCEAN BLVD Y-9
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND PRINTED NAME OF REGISTERED AGENT

Joseph Dagher 2/28/02 561-2653272

CR2E037 (9/01)