

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 726829

1. Entity Name

DELRAY DUNES GARDEN VILLAS, INC.

Principal Place of Business

6 GARDEN DR  
BOYNTON BEACH FL 33436-5502  
US

Mailing Address

6 GARDEN DR  
BOYNTON BEACH FL 33436-5502  
US

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

59-1583896

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

THORPE, STEPHEN F  
GARDEN VILLA #6  
BOYNTON BEACH FL 33436

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

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 HUGHES, MARILYN  
STREET ADDRESS 10 GARDEN DRIVE  
CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE T/D ☐ Change ☒ Addition  
NAME ALAN ARMOUR  
STREET ADDRESS 4 GARDEN DRIVE  
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE D ☐ Delete  
NAME STROHM, ROBERT  
STREET ADDRESS 11 GARDEN DRIVE  
CITY-ST-ZIP BOYNTON BEACH FL 33436

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

TITLE PD ☐ Delete  
NAME THORPE, STEPHEN F  
STREET ADDRESS 6 GARDEN DR  
CITY-ST-ZIP BOYNTON BEACH FL 33436

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

TITLE D ☐ Delete  
NAME CLAUS, BEN  
STREET ADDRESS 8 GARDEN DRIVE  
CITY-ST-ZIP BOYNTON BEACH FL 33436

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

TITLE VPD ☐ Delete  
NAME MACDONALD, NATHANIEL  
STREET ADDRESS 15 GARDEN DRIVE  
CITY-ST-ZIP BOYNTON BEACH FL 33436

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Apr 13, 2001 8:00 am  
Secretary of State  
04-13-2001 90045 015 \*\*\*\*61.25

00035635



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)