

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729360

FILED  
Feb 22, 2011  
Secretary of State

**Entity Name:** HIGH POINT OF DELRAY BEACH CONDOMINIUM ASSOC. SEC. 6, INC.

**Current Principal Place of Business:**

1221 CLUB DRIVE WEAT  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

**Current Mailing Address:**

1221 CLUB DRIVE WEST  
DELRAY BEACH, FL 33445

**New Mailing Address:**

**FEI Number:** 59-1565934

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BUTLER, ELLEN  
1430B HIGH POINT WAY NW  
DELRAY BEACH, FL 33445 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: BUTLER, ELLEN  
Address: 1430B HIGH POINT WAY NW  
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP/S  
Name: PRENDERGAST, ANTHONY  
Address: 1272A CLUB DRIVE WEST  
City-St-Zip: DELRAY BEACH, FL 33445

Title: T  
Name: MYERS, WARREN  
Address: 1397A HIGH POINT WAY NW  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D  
Name: HAMILL, ALFRED  
Address: 1365A HIGH POINT WAY SW  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D  
Name: MONACO, VINCENT  
Address: 1255D HIGH POINT PLACE S  
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: ELLEN BUTLER

P

02/22/2011

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

\_\_\_\_\_  
Date