

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744719

FILED
Mar 02, 2009
Secretary of State

Entity Name: THE PINES OF DELRAY NORTH ASSOCIATION, INC.

Current Principal Place of Business:

1431 NW 18TH AVE
DELRAY BCH, FL 33445

New Principal Place of Business:

Current Mailing Address:

1431 NW 18TH AVE
DELRAY BCH, FL 33445

New Mailing Address:

FEI Number: 59-1886546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENTHAL, DAVID C
PHOENIX MGMT.
3082 JOG ROAD
LAKE WORTH, FL 33467 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: AT () Delete
Name: NESSELL, SHELDON
Address: 2009 NW 18 ST. #104
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP () Delete
Name: CORNETT, CHARLES
Address: 1721 NW 19TH TERRACE #201
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: SADOFSKY, JEROME
Address: 1420 NW 18TH AVE 202
City-St-Zip: DELRAY BEACH, FL

Title: PD () Delete
Name: FENLON, JAMES
Address: 1420 NW 18TH AVE #202
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: YELOWITZ, MORRIS
Address: 1260 NW 20 AVE., #102
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: LOTITO, JERRY
Address: 1840 NW 13 ST., #102
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TS (X) Change () Addition
Name: TAVANO, THERESE
Address: 1361 N.W. 19 STREET, #204
City-St-Zip: DELRAY BEACH, FL 33445

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: O'SULLIVAN, DONALD
Address: 1340 N.W. 18 AVENUE #201
City-St-Zip: DELRAY BEACH, FL 33445

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES FENLON

P

03/02/2009

Electronic Signature of Signing Officer or Director

Date