

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90020 001 ****61.25

DOCUMENT # 747569

1. Entity Name
DELRAY RACQUET CLUB ASSOCIATION, INC.



Principal Place of Business
**610 EGRET CIR
DELRAY BEACH, FL 33444 US**

Mailing Address
**610 EGRET CIR
DELRAY BEACH, FL 33444 US**

40041700



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03152006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-1924245

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SCHNER, LARRY E ESQ.
750 S. DIXIE HIGHWAY
BOCA RATON, FL 33432**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **MCCANN, WILLIAM W**
STREET ADDRESS **500 EGRET CIRCLE, UNIT #6507**
CITY-ST-ZIP **DELRAY BEACH, FL 33444**

TITLE **VP** ☐ Delete
NAME **GLESS, FREDRICK**
STREET ADDRESS **750 EGRET CIRCLE, UNIT #6507**
CITY-ST-ZIP **DELRAY BEACH, FL 33444**

TITLE **T** ☐ Delete
NAME **ATKINSON, ROBERT**
STREET ADDRESS **2255 LINDELL BLVD., UNIT #4505**
CITY-ST-ZIP **DELRAY BEACH, FL 33444**

TITLE **S** ☒ Delete
NAME **MILSTEIN, MICHELLE C**
STREET ADDRESS **2255 LINDELL BLVD., UNIT #4505**
CITY-ST-ZIP **DELRAY BEACH, FL 33444**

TITLE **D** ☒ Delete
NAME **HOFFMAN, GUNTAR**
STREET ADDRESS **955 DOTTEREL RD #2507**
CITY-ST-ZIP **DELRAY BEACH, FL 33444**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE ☐ Change ☒ Addition
NAME **S. RICHARD LEARNER**
STREET ADDRESS **755 DOTTEREL ROAD #1511**
CITY-ST-ZIP **DELRAY BEACH, FL 33444**

TITLE ☐ Change ☒ Addition
NAME **JIRAIK KURNEIAN**
STREET ADDRESS **2255 LINDELL BLVD. #4310**
CITY-ST-ZIP **DELRAY BEACH, FL 33444**

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 exemptions contained 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 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:

William W. McCann

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM MCCANN

3/17/06

Date

561-276-3792

Daytime Phone #