

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 07, 2008**  
**Secretary of State**

DOCUMENT# 750859

**Entity Name:** FALL RIDGE OF DELRAY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1100 SW 4TH AVENUE  
DELRAY BEACH, FL 33444 US**New Principal Place of Business:****Current Mailing Address:**DONNA SLACK-DELLES  
2241 W. HOWARD ST.  
CHICAGO, IL 60645 US**New Mailing Address:**C/O JLW MANAGEMENT CORP.  
3205 NW 62ND STREET  
BOCA RATON, FL 33496 US**FEI Number:** 59-2142052**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MURPHY, ANDREW  
1946 NE 5TH AVENUE  
BOCA RATON, FL 33431 US**Name and Address of New Registered Agent:**JLW MANAGEMENT CORP.  
3205 NW 62ND STREET  
BOCA RATON, FL 33496 US

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: LOUIS WELTMAN

12/07/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WOLF, STEPHEN  
Address: 17483 TIFFANY TRACE  
City-St-Zip: BOCA RATON, FL 33487

Title: T ( ) Delete  
Name: MURPHY, ANDREW  
Address: 1946 NE SAUENUE  
City-St-Zip: BOCA RATON, FL 33431

Title: S ( ) Delete  
Name: WOLF, BRANDON  
Address: 1946 NE S AVE  
City-St-Zip: BOCA RATON, FL 33431

Title: V (X) Delete  
Name: ROBINSON, NORRIS  
Address: 1650 SE SEASHORE LN  
City-St-Zip: PORT SAINT LUCIE, FL 34983

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: JLW MANAGEMENT CORP.,  
Address: 3205 NW 62ND STREET  
City-St-Zip: BOCA RATON, FL 33496

Title: T (X) Change ( ) Addition  
Name: WOLF, STEPHEN  
Address: 17483 TIFFANY TRACE  
City-St-Zip: BOCA RATON, FL 33487

Title: S (X) Change ( ) Addition  
Name: SCHRANTZ, PHILIP J  
Address: 702 NE 8TH AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483-574 US

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: LOUIS S. WELTMAN

P

12/07/2008

Electronic Signature of Signing Officer or Director

Date