

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 09, 2006 8:00 am
Secretary of State

05-09-2006 90080 030 ****61.25

DOCUMENT # 751424	
1. Entity Name BALLANTRAE CONDOMINIUM ASSOCIATION OF PALM BEACH COUNTY, INC.	

Principal Place of Business 4333 N. OCEAN BLVD. DELRAY BEACH FL 33483	Mailing Address 4333 N. OCEAN BLVD. DELRAY BEACH FL 33483
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 59-1995685	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HOLLAND & KNIGHT, LLP ONE EAST BROWARD BLVD ATTN: ROBERT E. FERRIS, JR. FT. LAUDERDALE FL 33301
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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 filing statement) DATE

FILE NOW: 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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE SD NAME TAYLOR, MARILYN STREET ADDRESS 4333 N OCEAN BLVD, APT AN4 CITY-ST-ZIP DELRAY BEACH FL 33483	☒ Delete	TITLE SD NAME Kiechel, Doane STREET ADDRESS 4333 N. Ocean Blvd, Apt AN3 CITY-ST-ZIP Delray Bch, FL. 33483	☒ Change ☐ Addition
TITLE TD NAME GOTTFRED, RONALD E STREET ADDRESS 4333 N OCEAN BLVD APT AS4 CITY-ST-ZIP DELRAY BEACH FL 33483	☒ Delete	TITLE TD NAME Dering, Garrett STREET ADDRESS 4333 N. Ocean Blvd., Apt CS5 CITY-ST-ZIP Delray Bch, FL. 33483	☒ Change ☐ Addition
TITLE VD NAME KRESKO, ROBERT STREET ADDRESS 4333 N. OCEAN BLVD. CITY-ST-ZIP DELRAY BEACH FL 33483	☒ Delete	TITLE D NAME Kiwan, John STREET ADDRESS 4333 N. Ocean Blvd, Apt BN2 CITY-ST-ZIP Delray Bch, FL. 33483	☒ Change ☐ Addition
TITLE PD NAME AUGUSTYN, FRANK STREET ADDRESS 4333 N OCEAN BLVD, B54 CITY-ST-ZIP DELRAY BEACH FL 33483	☐ Delete	TITLE NAME STREET ADDRESS 4333 N. Ocean Blvd, Apt B54 CITY-ST-ZIP	☒ Change ☐ Addition
TITLE D NAME FREY, DAVID STREET ADDRESS 4333 N OCEAN BLVD, APT CN3 CITY-ST-ZIP DELRAY Bch FL 33483	☐ Delete	TITLE NAME STREET ADDRESS V.P., D CITY-ST-ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Frank J Augustyn **FRANK J AUGUSTYN** 4/28/06 561-2723965