

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90211 046 ****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			
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1995685	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent HOLLAND & KNIGHT, LLP ONE EAST BROWARD BLVD ATTN: ROBERT E. FERRIS, JR. FT. LAUDERDALE FL 33301				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)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD KIECHEL, DOANE 4333 N OCEAN BLVD APT AN3 DELRAY BEACH FL 33483	☐ Delete	TITLE PD NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD DERING, GARRETT 4333 N OCEAN BLVD APT CS5 DELRAY BEACH FL 33483	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KIRWON, JOHN 4333 N OCEAN BLVD APT BN2 DELRAY BEACH FL 33483	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition Kirwan, John	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD AUGUSTYN, FRANK 4333 N OCEAN BLVD APT B54 DELRAY BEACH FL 33483	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD FREY, DAVID 4333 N OCEAN BLVD, APT CN3 DELRAY BCH FL 33483	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete	TITLE SD NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition McCaull, Cecile 4333 N. Ocean Blvd. Apt BN4 Delray Bch, Fl 33483	



1st MOORE CR2E037 (10/06)

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: *Doane Kiechel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #