FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #

752860

(7)

DELRAY VILLAS PLAT 3 HOMEOWNERS' ASSOCIATION, IN

C.							
Principal Place of Business Mailing Address						T SOUTH I BOOK BISKO HOUR FOLKO DEIN DEKK OLDER OLDER DIEKE DIEKE OLDER DIEKE DIEKE DIEKE DIEKE DIEKE DIEKE DIEKE	
ON, INC. ON, INC.						3. Date incorporated or Qualified	
			ONNIE BLVD.			06/09/1980	
DELRAY BEACH FL 33484 DELRAY BEACH FL 33484			L 33484			4. FEI Number Applied For	
						59-2311367 Not Applicable	
-	lace of Business	2a. Mailing Addre	SSS			5. Certificate of Status Desired \$8.75 Additional	
21 26			etc			Fee Required	
22 27			610.			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
	City & State City & State					7. Is this nonprofit corporation a homeowners association?	
23		28				✓ Yes □ No	
Zip	Country	Zip	, ·			8. This corporation owes or has paid the current year Intangible	
24	25	nt Registered Agent	30	<u>└</u> —		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered A							
et iou	N DAVID						
ST. JOHN, DAVID 500 AUSTRALIAN AVENUE S.				82	82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 800				83			
WEST PALM BEACH FL 33401				84	City	■ 85 Zip Code	
L				[-]	-	 	
11. Pursuant	to the provisions of Sections 617.050	32 and 617.1508, Florid	a Statutes, t	the above	named	corporation submits this statement for the purpose of changing its registered	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and this if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
12.		ID DIRECTORS	(NOTE: He	gistered Ager	nt signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	DEL	ETE	1.1 TITLE		Change WAddition	
NAME	HOUGH, JACK	•	j	1.2 NAME		RUTH E. PORTNOY	
STREET ADDRESS	5772 WANDA LANE			1,3 STREET	ADDRESS	14757 EDNA WAY	
CITY-ST-ZIP	DELRAY BEACH FL			1.4 CITY-ST	Γ- <u>Ζ</u> !Ρ	DELEAY BEACH . CL 33 Get	
TITLE	D	☐ DEL	.ETE 1	2.1 TITLE		1 Constant Constant	
NAME	SMITH, FRANK			2.2 NAME		ROSCYN COHEN	
STREET ADDRESS	5811 WANDA LANE			2,3 STREET		14585 LUCY DR	
CITY-ST-ZIP	DELRAY BEACH FL	DEL	FTF	2, 4 CITY - S 3,1 TITLE	T-Z!P	DELARY BENCH. FL33 COY DELARY BENCH. FL33 COY MEYER POSNER 14560 LVCY DR	
NAME	SULZER, JERALD			3.2 NAME		NEVER POSNER	
STREET ADDRESS	14616 LUCY DR	1	1	3.3 STREET	ADDRESS	14566 LUCY DR	
CITY-ST-ZIP	DELRAY BCH. FL	•		3.4. CITY-S		DELRAY BEACH FL 33 484	
TITLE	D	☐ DEL	ETE	4.1 TITLE		Change L Addition	
NAME	GURNEY, HAROLD		l	4. 2 NAME		LEE BONDER	
STREET ADDRESS	5814 DORIS COURT			4.3 STREET	ADDRESS	14606 LUCY DIZ	
CITY-ST-ZIP	DELRAY BEACH FL	·		4.4 CITY - ST		DELRAY AGACH EL33484	
TITLE	D	DEL	ETE	5.1 TITLE		Change Addition	
NAME	MORRIS, LEBOWITZ	*		5.2 NAME		DELRAY BEACH, FL 33484	
STREET ADDRESS	14680 LUCY DR		ł	5.3 STREET	ADDRESS	KELDAY AFALL M BRYCY	
CITY-ST-ZIP	DELRAY BEACH FL	DEL	FTE 1	5.4 CITY-ST 6.1 TITLE	- ZIP	Change Addition	
NAME	ABELSKY, GEORGE	ے در		6.2 NAME		_ Crange _ Routton	
STREET ADDRESS	14589 LUCY DR			6.3 STREET	ADDRESS		
SHIPE ANDRESS	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Ŀ	g.o otticel /	~511.00		

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

BELIGHATURETREPEDE. PORTNOY

15/98 (561) 496-4290

FILED

Feb 02 1998 8:00am

Secretary of State