## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 03, 2006 8:00 am Secretary of State

					Secretary of State				
DOCUMENT # 755073  1. Entity Name DELRAY OAKS CONDOMINIUM ASSOCIATION NO. 2, INC.						90363 022 ****61			
5850 W. ATL Delray bea	MANAGEMENT Antic ave. CH, FL 33484	Mailing Address C/O CASTLE MANAGEMI 5850 W. ATLANTIC AVE DELRAY BEACH, FL 33			42905 1111111111111				
21 SE	Strate of Business Strate Stra	3. Mailing Address	STREET		<b>LUI EIIDI EIIII EAUK 1866</b> 0 LKI	81812 B1811 B1811 B1811 B1811 B1811			
Sulte, Apt.	,	Suite, Apt. #, etc.		03202006		CR2E037 (11/05)			
BOCA P	ATON IL	BOCA ILATON	F	4. FEI Num 59-20	ber 87442	No	oplied For ot Applicable		
<u>35432</u>	P Country BEACH	35432	PALM BE	HUT	te of Status Desired	See Require			
	6. Name and Address of Current	Registered Agent	Name	7 Name ar	id Address of New R	egistered Agent	1		
RANDALL K ROGER & ASSOCIATES, PA				Address (P.O. Box Number is Not Acceptable)					
			City			<b>₽∎</b> Zip Cod			
			",			FL   Zip Coo	e		
the obligations of registered agent.  SIGNATURE									
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	E: Régistèred Agent signa	rure required when renstating)		DATE			
SIGNATUHE.	Signature, typed or printed name of registered agent.  Filling Fee Is \$61.25  Due by May 1, 2006	<del> </del>	npaign Financing	\$5.00 May Added to Fee	DO (	DATE  ake check payable to ida Department of Si			
SIGNATUHE.	Filing Fee Is \$61.25 Due by May 1, 2006 OFFICERS AND DIF	9. Election Can Trust Fund C	npaign Financing	\$5.00 May Added to Fee ADDITIONS/C	s Flori	ake check payable to	tate		
10. TILE	Filing Fee Is \$61.25 Due by May 1, 2006 OFFICERS AND DIF	9. Election Can Trust Fund C	npaign Financing Contribution,	S5.00 May Added to Fee	HANGES TO OFFICE	ake check payable to ida Department of Si	tate		
10. TITLE NAME	Filing Fee Is \$61.25 Due by May 1, 2006  OFFICERS AND DIF PD VOILES, GAYLE	9. Election Can Trust Fund C	npaign Financing Contribution.  11.  111.E  NAME	S5.00 May Added to Fee	HANGES TO OFFICE	ake check payable to da Department of Si	tate		
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10. TITLE NAME STREET ADDRESS	Filing Fee Is \$61.25 Due by May 1, 2006  OFFICERS AND DIF PD VOILES, GAYLE 2953 SW 22ND CIR.	9. Election Can Trust Fund C RECTORS	npaign Financing Contribution.  11.  111LE NAME STREET ADDRESS	S5.00 May Added to Fee ADDITIONS/C PID LAWRENC 2883 51 DELKAY	HANGES TO OFFICE	ake check payable to ida Department of Sins AND DIRECTORS IN Change	110 Addition		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee Is \$61.25 Due by May 1, 2006  OFFICERS AND DIF PD VOILES, GAYLE 2953 SW 22ND CIR. DELRAY BEACH, FL 33445	9. Election Can Trust Fund C	npaign Financing Contribution.  11.  TILE NAME STREET ADDRESS CITY-ST-ZIP	S5.00 May Added to Fee ADDITIONS/C PIDELAWRENC 288351 DELKAY E	HANGES TO OFFICE	ake check payable to ida Department of Signs AND DIRECTORS IN Change	tate		
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10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee Is \$61.25 Due by May 1, 2006  OFFICERS AND DIF  PD  VOILES, GAYLE 2953 SW 22ND CIR.  DELRAY BEACH, FL 33445  VPSD  TATARYNOWICZ, ALISON 2936 SW 22ND CIR.  DELRAY BEACH, FL 33445	9. Election Can Trust Fund C	Inpaign Financing Contribution.  11.  ITILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	S5.00 May Added to Fee ADDITIONS/C PID: LAWRENC 2883-51 DELRAY E V P CHARLOTT 2916 SW DELRAY	HANGES TO OFFICE HANGES TO OFFICE SEACH, FU DILKS DEACH, F	ake check payable to ida Department of Si as AND DIRECTORS IN Change	Addition		
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indicated on this report or supplied with this filling 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 me 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:	y	3-	28-06
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #