

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755073

FILED  
Mar 27, 2009  
Secretary of State

**Entity Name:** DELRAY OAKS CONDOMINIUM ASSOCIATION NO. 2, INC.

**Current Principal Place of Business:**

21 SE 5TH ST  
100  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

21 SE 5TH ST  
100  
BOCA RATON, FL 33432

**New Mailing Address:**

**FEI Number:** 59-2087442

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RANDALL K ROGER & ASSOCIATES, PA  
621 NW 53 STREET, STE 300  
BOCA RATON, FL 33487 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FRIED, LAWRENCE C  
Address: 2883 SW 22 CIR  
City-St-Zip: DELRAY BEACH, FL 33445

Title: T ( ) Delete  
Name: RAWLINGS, GREG  
Address: 2956 SW 22ND CIR.  
City-St-Zip: DELRAY BEACH, FL 33445

Title: T ( ) Delete  
Name: MCFADDEN, ELIZABETH  
Address: 2924 SW 22ND CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D ( ) Delete  
Name: SCHMIDT, DARLENE  
Address: 2898 SW 22ND CIR.  
City-St-Zip: DELRAY BEACH, FL 33445

Title: PD ( ) Delete  
Name: DILKS, CHARLOTTE  
Address: 2916 SW 22ND CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: REIKEN, MICHELLE  
Address: 94 GIORDANO DRIVE  
City-St-Zip: WEST ORANGE, NJ 07052

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: HAMILTON, LINDA  
Address: 2905 SW 2ND CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445

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: LARRY FRIED

PD

03/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date