CORPORATION
ANNUAL REPORT
1995

Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 9:50

DOCUMENT # 755980 (0)

1. Corporation Name
THE POINT AT DELRAY CONDOMINIUM ASSOCIATION, INC

Principal Place of Business	Mailing Address
243 CANAL POINT SOUTH DELRAY BEACH FL 33444-1870	243 CANAL POINT SOUTH DELRAY BEACH FL 33444-1870

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/20/1981
3a. Date of Last Report: 03/29/1994
4. FEI Number: 59-2256777 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

EHLEY, GLEN
119 CANAL POINT S.
DELRAY BEACH FL 33444

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE		☑ Change ☐ Addition
NAME	SVIRK, CHARLES	1.2 NAME		
STREET ADDRESS	~~122 CANAL POINT S.~~	1.3 STREET ADDRESS	2337 SW 23RD CRANBROOK DR.	
CITY-ST-ZIP	DELRAY BEACH FL	1.4 CITY-ST-ZIP	Boynton Beach FL 33436	
TITLE	D	2.1 TITLE		☐ Change ☐ Addition
NAME	COTHRON, ED	2.2 NAME		
STREET ADDRESS	110 CANAL POINT N.	2.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33444	2.4 CITY-ST-ZIP		
TITLE	~~S~~	3.1 TITLE	SIT	☑ Change ☐ Addition
NAME	SCHREIBER, LYNN	3.2 NAME		
STREET ADDRESS	131 CANAL POINT S.	3.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL	3.4 CITY-ST-ZIP		
TITLE	~~VP~~	4.1 TITLE	VP	☐ Change ☑ Addition
NAME	~~BLY, DONNA~~	4.2 NAME	Gotham, Mary Anne	
STREET ADDRESS	~~199 CANAL POINT N~~	4.3 STREET ADDRESS	123 CANAL PT. South	
CITY-ST-ZIP	~~DELRAY BEACH FL~~	4.4 CITY-ST-ZIP	DELRAY Beach, FL. 33444	
TITLE	P	5.1 TITLE		☐ Change ☐ Addition
NAME	EHLEY, GLEN	5.2 NAME		
STREET ADDRESS	119 CANAL POINT S.	5.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Glenn Ehley, President 4/6/95 (407) 347-1494
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0060384